and

or night)

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317/241-4336

at

Response a 1-2675.

of a spill call the Indiana Office of Environmental | Il Response Center at 800/424-8802 or 202/426-

In case o National I

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

US EPA RECORDS CENTER REGION 5

(Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91 PLEASE PRINT OR TYPE Information in the shaded areas is not required by Federal law, but items D. F. H and I are required by State law. 1. Generator's US EPA ID No. Manifest 2. Page 1 UNIFORM HAZARDOUS Document No N I D 016746398 · WASTE MANIFEST οįI 3. Generator's Name and Mailing Address MIDWEST TIMER SERVICE, INC. A. State-Manifest Document Number 0315919 P.O. BOX 126, 4815 N. M63 B. State Generator's ID BENTON HARBOR, MI 49022 4. Generator's Phone (616 )449 361 P. 849-2800 C. State Transporter's ID Transporter 1 Company Name 6. Use EPA ID Number 0079 D. Transporter's Phone 312-596-NR. FRANK, INC.
7. Transporter 2 Company Name D 0 6 9 5 0 6 1 6 0 Use EPA ID Number E. State Transporter's ID . . . F. Transporter's Phone 9. Designated Facility Name and Site Address
AMERICAN CHEMICAL SERVICE Use EPA ID Number G. State Facility's ID ್ರೇ 9180890002 COLFAX AVE AT C&O R.R. P.O. BOX 190 H. Facility's Phone GRIFFITH, IN 46319 ND 0 1-6 3 6 0 2 6 5 312-768-3400 14. Unit 13. Total Waste No. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Quantity Wt/Vn WASTE 1,1,1, TRICHLORMETHANK UN2831 DADM 0 2 2 0 ORM-A G F001 b. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above G-GALLONS 15. Special Handling Instructions and Additional Information, 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Date Day 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name ひひいかえん 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Date Day Year Month 19. Discrepancy Indication Space 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

EPA Form 8700-22 Previous editions are obsolete. State Form 11865 (R/4-88)

Printed/Typed Name

120751639

### STATE OF ILLINOIS

<u>0101346</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

Authorization Number 9 9 7 1 0 1

Miles Laboratories	195 W. Birch	St.		a
(Company Name)	Address		0 9 1	0550008
Kankakee	IL	60901	14	Generator Number
City	State	Zip	<u> </u>	- · · · · · · · · · · · · · · · · · · ·
	WASTE HAULER(S	)		
nKankakee Industrial Disposal	1360 E. Locust		S.W.H. Registration Nu	mber 0 0 6 6 0 10
Hauler Name	Hauler Address	<del>rai kir</del> akyrôjaki. S	o o o o o o o o o o o o o o o o o o o	25
		fi Harris		
(2) Hauler Name	Hauler Address		S.W.H. Registration N	ımber
	DESTINATION - DISPOSAL STORAGE	OR TREATMENT SITE		
American Chemical Service	Colfax Ave & Ct/	) D D		91808902
(Facility Name)	Address			Site Number
Griffith"	Indiana	46319		
ಗಾರ ಎಂದು ಕ್ರಾನ್ ಜಿಕ್ಕೆ ಕಿನ್ನಾರ್ City ಎಕ್ಕಡೆಗೆ ಎಂದು ಬರುವುದು ಪ್ರಾರಂಭ ಮತ್ತು ನಿರ್ದೇಶಕ ಬೆಂದು TO BE COMPLETED BY ಎಂದು ಸಂಪಟ್ಟಿಯ ಕಿನ್ನಾರ್ ಮತ್ತು ಮತ್ತು ಸಂಪರ್ಣಕ್ಕೆ ಬಳಕಾ	State A State	State of Zip		
WASTE GENERATOR				
WASTE NAME: Acetone & C	ontaminates		VASTE PHASE:	Liouid
			more i imae.	(Liquid, Gaseous, Solid)
	·			
HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS	C OE THE DOT HAZARD OF ASSISTATION II	NDICATED IMMEDIATELY DI		
SHIPPING DESCRIPTION:	THE DOT MAENING CEASSIFICATION II	NOICKIED IMMEDIATELT BE	HAZARD CLASS:	
	•			
	<del></del>	_	<del></del>	<del></del>
<u></u>		_		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS P IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA	ROPERLY CLASSIFIED. DESCRIBED, PACH RTMENT OF TRANSPORTATION.	(AGED, MARKED, AND LABS	ELED AND IS IN PROPER	CONDITION FOR TRANSPORTATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATIO	ON , O			
2/22/40	( ) encara 1	20.5/50/1	<u></u>	
DATE: 2/2/X()	(Authorized Signatu	re)		
WASTE HAULER*		3000	GALLON	(Circle One)
<del></del>	QUANTITY OF WASTE RECEIVED:	- 5000 - 517	Z CU. 103.	\$2
METHOD OF SHIPMENT (Circle One) DRUMS	TANK TRUCK OPE	EN TRUCK OTH	FD 40	
•			ER(Spe	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FO	OR TRANSPORT AND 1	CKNOWLEDGE THE DESTINATION
F. H. Melle		,	ſ	2 228
(Authorized Signature)	<del>-</del>		Year of the same	DATE: 2 122, 8
(Adminized Signature)			•	D. 1
(Authorized Signature)	•			DATE:///
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				·
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AN	D INDICATED QUANTITY HAS BEEN ACCE	PTED:		
0.m2M. 0/	- LE COMMON ACETA MOOLI	- <del></del> -		DATE 122,80
(Authorized Signature)	<del>- u</del>			DATE 10 10 10 C
COMMENTS OR SPECIAL INSTRUCTIONS:				
N ILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL A	SSISTANCE NUMBERS	<del></del>	OUTSIDE ILLINOIS: 800 / 424
DISTRIBUTION: PART   GENERATOR PART			5 IEPA PART 6	GENERATOR

#### STATE OF ILLINOIS

0101347

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE CENERATOR

Authorization Number 9 9 7 1 0 1

	WASTE GENERAT	OR	Authorization Number $\frac{9}{8}$ $\frac{9}{7}$ $\frac{1}{10}$ $\frac{1}{13}$
Miles Laboratories	195 W. Bird	ch St.	•
(Company Name)	Address		0 9 1 0 5 5 0 0 0 8 G Generator Number 24
Kankakee	State	<u>60901</u>	14 Generator Number 24
	WASTE HAULER(S		<del></del>
	·		0.16
() Kankakee Industrial Disposal		<u>t 1900 in</u> er 1915 jæ	S.W.H. Registration Number 0 0 6 6 0/1
Hauler Name	Hauler Address		25, 31, 31, 32, 31, 31, 32, 31, 31, 31, 31, 31, 31, 31, 31, 31, 31
			CWU Contact the Number
Hauler Name	Hauler Address	e telephone	S.W.H. Registration Number 32 38
	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE	
American Chemical Service	Colfax Ave.	C&O R.R.	
(Facility Name)	Address	T COU R.R.	9 1 8 0 8 9 0 2
Griffith	<u>Indiana</u>	46319	
	State the specific part of	Zip	
O BE COMPLETED BY ASTE GENERATOR			
WASTE NAME: Acetone	% Contaminates	W	ASTE PHASE:
			ASTE PHASE: Liquid (Liquid, Gaseous, Solid)
<del></del>			
HIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS		KAGED, MARKED, AND LABE	LED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	_	
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	ITION /		
DATE 2/28/80	(Authorized Signati	rver	·
	(variousea signati	ure)	T GALLONS (Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: _	3000	Z CU. 703.
		47 52	52
METHOD OF SHIPMENT (Circle One) ORUI	MS TANK TRUCK OP	EN TRUCK OTH	ER(Specify)
HEREBY CERTIFY HAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FO	OR TRANSPORT AND 1 ACKNOWLEDGE THE DESTINATION AS
NDICATED:			0 30 00
1) AWITHER !			DATE 22 / 28 / 80
(Authorized Signature)		· -	DATE:///
(Authorized Signature)		180 m	DAIE:///
ISPOSAL, STORAGE, OR TREATMENT FACILITY*			
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCE	PTED.	
For Olamber	,		DATE 0 100 11
(Authorized Signature)			DATE: 2 86. OS
COMMENTS OR SPECIAL INSTRUCTIONS.			
		· · · · · · · · · · · · · · · · · · ·	
N ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL A		OUTSIDE ILLINOIS: 800 / 424-880
DISTRIBUTION: PART 1 GENERATOR PAR	T-2 IEPA PART-3 SITE P	ART 4 HAULER PART	5 IEPA PART 6 GENERATOR

#### STATE OF ILLINOIS

<u>0101348</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

	_	_	_		_	_	
Authorization Number	9	_9_	_/_	1	U	1	

(Company Name)	Address	•	0.01.0	E E O O O O
Kankakee	IL Address	60901	<u>0 9 1 0</u>	5 5 0 0 0 8 Generator Number
City	State	Zip		
	WASTE HAULER(	5)		
Kankakee Industrial Disposal	1360 E. Locus	•	S.W.H. Registration Num	0000
Hauler Name	Hauler Address	<u>•                                      </u>	S.W.H. Registration Num	ber <u>U U 0 0 C</u>
A SAN TAN BANGKAN BANG Bangkan Bangkan Bangka			· .	
A STATE OF HOUSE NAME AND THE TOTAL OF THE STATE OF THE S	Hauler Address		S.W.H. Registration Nur	mber
CONTRACTOR TO CONTRACTOR CONTRACT	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE		
merican Chemical Service	Colfax Ave. & Cl	LO R.R.		9180890
(Facility Name)	Address Indiana	AE210		Site Number
THE REPORT OF CITY OF THE PARK WITH THE PARK	State productions	46319 Zip		
COMPLETED BY				
E GENERATOR				
WASTE NAME: Acetone &	Contaminates	·	WASTE PHASE:	(Liquid, Gaseous, Solid)
			•	
	A	73	<u> </u>	
PECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST II SHIPPING DESCRIPTION:	S OF THE DOT HAZARD CLASSIFICATION I	INDICATED IMMEDIATELY B	ELOW: HAZARD CLASS:	
Silit i ind Sessiti i i i i i i i i i i i i i i i i i	•		TIALAND CLASS.	
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CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA	ARTMENT OF TRANSPORTATION.	KAGED, MARKED, AND LAB	ELED AND IS IN PROPER (	CONDITION FOR TRANSPORT
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA	ON Armani of transportation.	Barber	ELED AND IS IN PROPER (	CONDITION FOR TRANSPORT
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA	ARTMENT OF TRANSPORTATION.	Barber	<i>'</i>	
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION WATE:	ON (Authorized Signate	Barber		CONDITION FOR TRANSPORT
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARE  BY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  ATE:	ON Armani of transportation.	Barber		
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: THE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS	QUANTITY OF WASTE RECEIVED:	Sander 250 c 47 250 c	GALLONS 2 CU. YUS.	(Circle One)
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  BEY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  TE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS  THE BY GERTIFY HAT TAP AFOY DESCRIBED SPECIAL WASTE	QUANTITY OF WASTE RECEIVED:	Sander 250 c 47 250 c	GALLONS 2 CU. YUS.	(Circle One)
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CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  THAT IS THAT IS ABOVE DESCRIBED SPECIAL WASTE LATED:	QUANTITY OF WASTE RECEIVED:	Sander 250 c 47 250 c	GALLONS 2 CU. YUS.  HER(Speci	(Circle One)
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  TE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS  REBY CERTIFY HAT TAR ABOVE DESCRIBED SPECIAL WASTER  CATED:	QUANTITY OF WASTE RECEIVED:	250 CS	GALLONS 2 CU. YUS.  HER(Speci	(Circle One)  53  1y)  KNOWLEDGE THE DESTINA  DATE 34
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  THAT IS THAT IS ABOVE DESCRIBED SPECIAL WASTE LATED:	QUANTITY OF WASTE RECEIVED:	250 CS	GALLONS 2 CU. YUS.  HER(Speci	(Circle One)  53  fy)  KNOWLEDGE THE DESTINA
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  TE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS  TERM OF THAT THE AROY DESCRIBED SPECIAL WASTER  (Authorized Signature)	QUANTITY OF WASTE RECEIVED:	250 CS	GALLONS 2 CU. YUS.  HER(Speci	(Circle One)  53  1y)  KNOWLEDGE THE DESTINA  DATE 34
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  TE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS  THAT THE ABOVE DESCRIBED SPECIAL WASTE  (Authorized Signature)  (Authorized Signature)  OSAL, STORAGE, OR TREATMENT FACILITY*	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  (Y)  KNOWLEDGE THE DESTINA  DATE:  34  DATE:  1
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  OATE:  METHOD OF SHIPMENT (Circle One)  DRUMS  OATED:  (Authorized Signature)  OSAL, STORAGE, OR TREATMENT FACILITY*	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  (Y)  KNOWLEDGE THE DESTINA  DATE:  34  DATE:  1
(Authorized Signature)  OSAL, STORAGE, OR TREATMENT FACILITY	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  1y)  KNOWLEDGE THE DESTINA  DATE 34
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE:  TE HAULER*  METHOD OF SHIPMENT (Circle One)  DRUMS  REBY GERTIFY THAT TAR ABOVE DESCRIBED SPECIAL WASTE  (Authorized Signature)  OSAL, STORAGE, OR TREATMENT FACILITY*  EBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AN	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  (Y)  KNOWLEDGE THE DESTINA  DATE:  34  DATE:  1
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  OATE:  METHOD OF SHIPMENT (Circle One)  DRUMS  OATED:  (Authorized Signature)  OSAL, STORAGE, OR TREATMENT FACILITY*	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  (Y)  KNOWLEDGE THE DESTINA  DATE:  34  DATE:  1
CORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA  EBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  ATE:  METHOD OF SHIPMENT (Circle One)  DRUMS  EBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE  (Authorized Signature)  DSAL, STORAGE, OR TREATMENT FACILITY*  EBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AN	QUANTITY OF WASTE RECEIVED:	250 C  TEN TRUCK OTH  IN PROPER CONDITION F	GALLONS 2 CU. YDS.  HER(Speci	(Circle One)  53  (Y)  KNOWLEDGE THE DESTINA  DATE:  34  DATE:  1

#### STATE OF ILLINOIS

Q101349

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

	SPECIAL WASTE HAULIN WASTE GENERAT	=	Authorization Number 9 9 7 1 0 1			
Miles Laboratories	195 W. Bird	ch St.	<b>8</b> . 13			
(Company Name) Kankakee	Address I L	60301	0910550008 <sub>c</sub>			
City	State	Zip	14 Generator Number 24			
	WASTE HAULER(S					
(i) Kankakee Industrial Disposal	1262 5 1	a.	State of the state			
Hauler Name	1360 E. Locust Hauler Address	<del></del>	S.W.H. Registration Number 0 0 6 6 0/0			
(2) Hauter Name	- Hauler Address		S.W.H. Registration Number 32 38 38 38			
	- DESTINATION - DISPOSAL STORAGE	OR TREATMENT SITE				
American Chemical Service (Facility Name)	Colfax Ave & C	R R	9 1 8 0 8 9 0 2 39 Site Number 46			
		The same of				
TO BE COMPLETED BY AND CITY FOR THE FOREST AND A STATE OF THE STATE OF	restati di State reservizzazione e con il Generali administraturate in consissa e con	Transfer Andrews				
WASTE GENERATOR						
WASTE NAME: Acetone & Co	ntaminates		WASTE PHASE: Liquid			
			(Liquid, Gaseous, Solid)			
			•			
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PR IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPAR		KAGED, MARKED, AND U	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.			
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	4	//				
3/2/00	Semma 1X	Darlet	ノ			
DATE: 172/80	(Authorized Signat	nte)				
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: _	3000	GALLONS (Circle One)			
	VONTITION TO TO THE RECEIVED.	47	52 53			
METHOD OF SHIPMENT (Circle One) DRUMS			ITHER(Specify)			
I HEREBY CEATIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE INDICATED.	AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS			
(1) The Tille Sie			DATE: 3 / 12/80			
(Adthorized Stenature)			DATE://			
(Authorized Signature)			DATE:/			
DISPOSAL, STORAGE, OR TREATMENT FACILITYS						
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND	INDICATED QUANTITY HAS BEEN ACCE	EPTED:				
KOR Maus b			DATE: 3 / 12 / 80			
Tantuo excest at Readure	· · · · · · · · · · · · · · · · · · ·		ω 63			
COMMENTS OR SPECIAL INSTRUCTIONS:	· · · · · · · · · · · · · · · · · · ·					

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 4 HAULER PART - 5 IEPA

PART - 6 GENERATOR

OUTSIDE ILLINOIS 800 / 424-8802

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

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	DIVISION OF LAND POLL SPECIAL WASTE HAUL WASTE GENER	UTION CONTROL ING MANIFEST	Authorization Number 9 9 7 1 C 1
Miles Laboratories	195 W. Birc	•	0 13
(Company Name) Kankakee	Address		<u>0910550008</u> <sub>6</sub>
City	State	60901	14 Generator Number 24
	WASTE HAULER	<del></del>	
(1) Kankakee Industrial Disposal	1360 E. Lo	cust .	S.W.H. Registration Number 0 0 6 6 0 / 0
(2)			S.W.H. Registration Number
Souther Acquire to Hauler Name   10 Percent and the second second			S.W.H. Registration Number 32 38 38
	DESTINATION — DISPOSAL STORA	er a manager and the second and the second	
American Chemical Service	Colfax Ave	. & C&O R.R.	91808902
(Facility Name) Griffith City	Indiana	46319	y 39 Sile Number e
TO BE COMPLETED BY WASTE GENERATOR			· 1963年代大学学教教教教教教教
WASTE NAME: Acetone	& Contaminates		WASTE PHASE: Liquid
WASIE NAME			WASTE PHASE: L1QU1G (Liquid, Gaseous, Solid)
	<u> </u>		
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATIONS OF THE DESTRUCTION OF THE DES	PARTMENT OF TRANSPORTATION.	Jusu	
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	300	C 2 60: 103. (Circle One)
METHOD OF SHIPMENT (Circle One) DRUM			THER(Specify)
I HEREBY CERTIFY HAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTE	D IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) (Authorized Signature)	<u>.</u>	· · · · · · · · ·	DATE: 3 19 180
(2)	· 		DATE:///
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*		······	<del></del>
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC	CEPTED:	
ROA (Ayildouthéat Sugaituge)	<del></del>		DATE: /
COMMENTS OF SPECIAL INSTRUCTIONS	-		
COMMENTS OR SPECIAL INSTRUCTIONS:			
IN ILLINOIS: 217 / 782-3637	=24 HOUR EMERGENCY AND SPILL	PART 4 HAULER PA	

### STATE OF ILLINOIS

<u>010135</u>‡

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

Authorization Number 9 9 7 1 0 1

Miles Laboratories	195 W. Birc	" h St	8 13
(Company Name)	Address		0910550008
Kankakee	IL	60301	14 Generator Number 24
City	State	Zip	
	WASTE HAULER(S)		
(1) Kankakee Industrial Disposal	1360 E. Locus	t .	S.W.H. Registration Number 006601
Hauler Name	Hauler Address		25 31
(2) Hauler Name	Hauler Address		S.W.H. Registration Number
The Control of the Co	DESTINATION — DISPOSAL STORAGE (	OR TREATMENT SITE	The control of the co
		CAD R.R.	91808902
(Facility Name) Griffith	Address		Site Number
	Indfana State	46319 Zio	
TO BE COMPLETED BY		No entre the T	
VASTE GENERATOR			
WASTE NAME: Acetone &	Contaminates		VASTE PHASE:
	•		(Liquid, Gaseous, Solid)
	<del></del>	•	
HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS O	F THE DOT HAZARD CLASSIFICATION IN	DICATED IMMEDIATELY B	ELOW:
SHIPPING DESCRIPTION:		•	HAZARD CLASS:
·	_	_	
N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 36/80	_	Barber	
	<u></u>		GALLONS (Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	3000	Z CU: 10'S.
	4	7 52	53
METHOD OF SHIPMENT (Circle One) DRUMS	TANK TRUCK OPE	N TRUCK OTH	ER(Specify)
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	ND QUANTITY HAS BEEN ACCEPTED I	N PROPER CONDITION F	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
1) (Authorized Signature)			DATE: <u>03</u> 126180
2)(Authorized Signature)			DATE://
DISPOSAL, STORAGE, OR TREATMENT FACILITY			·
HEREBY ERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND	INDICATED CHANTITY HAS BEEN ASSES	TED:	
HEREBIACHTET THAT THE ABOVE DESCRIBED SPECIAL MASIC AND	אטטא מובים למאוו דודו מאס פכנו אניננר	ICU.	2 1/2 50
(Authorized Signature)			DATE:
(Vatuanten alimene)			
COMMENTS OR SPECIAL INSTRUCTIONS:		· · · · · · · · · · · · · · · · · · ·	
N. H. I.	24 HOUR EMERGENCY AND SPILL AS	SISTANCE NUMBERS	OHICIDE HANDIC, PED 1424 0000
IN ILLINOIS: 217 / 782-3637  DISTRIBUTION: PART - 1 GENERATOR PART - 2			OUTSIDE ILLINOIS: 800 / 424-8802 - 5 IEPA PART - 6 GENERATOR

#### STATE OF ILLINOIS

<u>0101352</u>

TO BE COMPLETED BY	STATE OF ILLINOIS	
WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY	= -= -= = =
•	DIVISION OF LAND POLLUTION CONTROL	1/4/2
	SPECIAL WASTE HAULING MANIFEST	Authorization Number 9 9 7 1 0 1
Miles Laboratories, Inc.	WASTE GENERATOR	8 13
	195 W. Birch St.	
(Company Name)	Address	<u>0910550008</u> <u>c</u>
<u>Kankakee</u>	IL 60901	14 Generator Number 24
City	State Zip	
	WASTE HAULER(S)	
(1) Kankakee Industrial Disposal	1360 E. Locust (	SWH. Registration Number 0 0 6 6 0 10
Hauler Name	Hauler Address	S.W.H. Registration Number 0 0 0 0 0 0 31
(2)		S.W.H. Registration Number
Hauler Name Control of Section 1997	Hauler Address	32 32 38
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
American Chemical Service	Colfax Ave. & Cao R.R.	91808902
(Facility Name)	Address Salar Salar Salar Address Salar Sa	Site Number
gant to the first of the whole the second of	State State	
TO BE COMPLETED BY	The second secon	And the second of the second o
WASTE GENERATOR		
WASTE NAME: Acetone & C	Contaminates wa	STE PHASE: Liquid
		(Liquid, Gaseous, Solid)
	<u> </u>	and the second s
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BEL	0W:
SHIPPING DESCRIPTION:		HAZARD CLASS:
	<del></del>	
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS	PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABEL	ED AND IS IN PROPER CONDITION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEP		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION (2	
11/ /-	General Surley	
DATE: 4/7/80	(Authorized Signature)	
	(Administration organization)	
WASTE HAULER*	QUANTITY OF WACTE DECEMED 2000	1 GALLONS (Circle One) 2 CU. YDS.
	QUANTITY OF WASTE RECEIVED:	33
METHOD OF SHIPMENT (Circle Que) DRUM		
menior of sint ment (once say)	S I TANK TRUCK S OPEN TRUCK OTHER	(Spacifu)
		(Specify)
	S TANK TRUCK OTHER  TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	•
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAST		TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
		TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
		•
(1) (Authorized Spendure)		TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:		TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) (Authorized Sprature)		TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) (Authorized Signature)  (2) (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE A	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A  (Authorized Signature)  (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A  (Authorized Signature)  (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE A	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS  DATE: 4/ 4/ 59
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED, SPECIAL WASTE A  (Authorized Signature)  (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	DATE://
(Authorized Signature)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE A  (Authorized Signature)  (Authorized Signature)  (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	DATE://

#### STATE OF ILLINOIS

<u>0101353</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

Authorization Number 9 9 7 1 0 1

Miles Laboratories	195 W. Birc	h St.	• , 13
(Company Name)	Address		0 9 1 0 5 5 0 0 0 8 <sub>G</sub>
Kankakee	IL	60901	14 Generator Number 24
City	State	Zip	
	WASTE HAULER(S)		
(1) Kankakee Industrial Disposal	1360 E. Locust	ý.	S.W.H. Registration Number 0066 0/0
Hauler Name	Hauler Address		25 31
(2) Hauler Name	Hauler Address		S.W.H. Registration Number
The STATE of the Section of the Sect	DESTINATION — DISPOSAL STORAGE O	R TREATMENT SITE	
American Chemical Service	Colfax Ave. & C&O R	.R.	91808902
(Facility Name)	Address		39 Site Number 46
			ing the second of the second o
Service City of the service of the s	State	Zip	
TO BE COMPLETED BY WASTE GENERATOR			
WASTE NAME: Acetone & C	ontaminates		WASTE PHASE: Liquid
The state of the s			(Liquid, Gaseous, Solid)
			•
THE COCOLAL WARTE DEING TOANGOODED HADES THE MANUEET IN	05 THE DOT HAZARD OF ACCIDENTAL AND		
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:	OF THE DOT HAZARD CLASSIFICATION INC	DICATED IMMEDIATELY	/ BELOW: HAZARO CLASS:
Shirt ind Description.	•		TIMEAND CENSS.
	<del>-</del>		
• •			
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPAR I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 4/9/80		rber	
WARTHAMERS	<del></del>		1 GALLONS (Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	<u> </u>	O 2 CO. 10S.
	47		52 52
METHOD OF SHIPMENT (Circle One) DRUMS	TANK TRUCK OPEN	TRUCK C	THER(Specify)
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE INDICATED:	AND QUANTITY HAS BEEN ACCEPTED IN	N PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
1) - (410)		i	1, 0,00
(1) Unithorized Signature) 11/2	-		DATE: $\frac{4}{54}/\frac{9}{9}/\frac{80}{59}$
(Almonaco agricio), 2			DATE//
(2)(Authorized Signature)	-		DAIE/
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			
LUCDERY CERTIFY THAT THE ARRIVE RECERIBER COSCIAL WASTE AND	HADICATED OILANTITY WAS DEEN ACCEDE	rcn.	•
THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND	ו ומטוכאונט עטאמיווו מאס פננו אנננרו	EU:	11 0 0
(Authorized Signature)	-		DATE: 4/ -9/ 803
F Profitorizes Signature)			
COMMENTS OR SPECIAL INSTRUCTIONS:			· · · · · · · · · · · · · · · · · · ·
	MA HOUR CHERCENOV AND COURSE	PICTANCE UNDERS	1
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR PART 2	TEPA PART 3 SITE PAR		OUTSIDE ILLINOIS. 800 / 424-8802 RT - 5 IEPA PART - 6 GENERATOR

#### STATE OF ILLINOIS

0101354

ENVIRONMENTAL PROTECTION AGENCY

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	SPECIAL WASTE HAULING MA	ANIFEST ,	Authorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St	•	8 - 13
(Company Name) <b>Kankakee</b>	Address	60901	0 9 1 0 5 5 0 0 0 8 Generator Number
City	. State	ip	Generator Number
	WASTE HAULER(S)	1/0	
() Kankakee Industriál Disposa	1360 E. Locust	12	LWY Registration Number 0 0 6 6 0 10
Hauler Name  (2)  # Hauler Name	Hauler Address Hauler Address		S.W.H. Registration Number 32 38
	DESTINATION — DISPOSAL STORAGE OR TRE	ATMENT SITE	The translation of the contraction of
American Chemical Service	Colfax Ave. & C&O	R.R.	91808902
(Facility Name)	Address	3 4 4	39 Site Number 44
TO BE COMPLETED BY AND	A Contract C	ma 41 <b>p</b> - South College History and Liverage	ে প্রত্যাধান করিছে কুলো কর্মান করিছে প্রত্যাধান করিছে করিছে করিছে করিছে প্রত্যাধানিক করিছে করিছে করিছে করিছে ক বিল্লাক্ষ্যাধানিক করিছে কর
WASTE NAME: Acetone 8	a Contaminates	WA	STE PHASE: Liquid (Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANU	FEST IS OF THE DOT HAZARD GRASSIFICATION INDICATE	ED IMMEDIATELY BELG	IW: HAZARD CLASS:
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WAST IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE	E IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, DEPARTMENT OF TRANSPORTATION.	MARKED, AND LABELE	D AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR	RMATION Jansta Str. (Authorized Signatufe)	rbev	
WASTE HAULER*		2000	(Circle One)
	QUANTITY OF WASTE RECEIVED	58/00/	2 (U. 705.
METHOD OF SHIPMENT (Circle One)	RUMS TANK TRUCK OPEN TRUC	CK OTHER	(Specify)
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL INDICATED:	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PRO	PER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) Caule Stanfiller (Authorized Signature)			DATE. 0 4/ 14/ 80
(2)	The state of the s		DATE:///
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*	÷		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND INDICATED QUANTITY HAS BEEN ACCEPTED:		DATE: 00 / - / - 05
COMMENTS OR SPECIAL INSTRUCTIONS:	<u>.</u>		
	· · · · · · · · · · · · · · · · · · ·		
IN 11 1 10 O.S. 21.7 / 792 2627	*74 HOUR EMERGENCY AND SPILL ASSISTA	NCE NUMBERS	OHTSIDE HELINDIS - 800 / 121 9802

PART - 2 IEPA

PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

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- 1									7

Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. (Company Name) Address Kankakee IL 60901 City State . ... WASTE HAULER(S) (I) Kankakee Industrial Disposal S.W.H. Registration Number 0 0 6 6 0/0 1360 E. Locust Hauler Address S.W.H. Registration Number A A Company of the Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C&O R.R. 91808902 Griffith IN 46319 Capting the State of the City of the state o TO BE COMPLETED BY Acetone & Contaminates THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) 1 GALLONS (Circle One) **WASTE HAULER\*** QUANTITY OF WASTE RECEIVED: \_ TANK TRUCK METHOD OF SHIPMENT (Circle One) DRUMS OPEN TRUCK OTHER \_\_\_\_\_(Specify) . I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 4 / /6/80 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY" ABOVE-DESCRIPED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: DATE: 4/1/6/80 COMMENTS OR SPECIAL INSTRUCTION \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART I GENERATOR PART - 3 SITE PART 4 HAULER

### TO BE COMPLETED BY

### ... STATE OF ILLINOIS:

0101356

WASIE GENERATOR	ENVIRONMENTAL PROTEC DIVISION OF LAND POLLUT SPECIAL WASTE HAULIN WASTE GENERATO	TION CONTROL IG MANIFEST	Authorization Numbe	$, \frac{997101}{1100000000000000000000000000000000$
Miles Laboratories	195 W. Birch S	<b>t.</b>	~~.	8 13
(Company Name) <b>Kankakee</b>	Address	60901		5 0 0 0 8 G
City	State	Zip	14 ; Gen	erator Number 24
	WASTE HAULER(S	)	~	
(1) Kankakee Industrial Disposal	1360 E. Locus	t		066 010
Hauler Name	Hauler Address		S.W.H. Registration Number	5 31
(2) Have the Hauler Name (%) and the parameter of the second of the seco	Hauler Address		S.W.H. Registration Number	2. An Charles (1985) 12. 12. 12. 13. 14.
	DESTINATION - DISPOSAL STORAGE	OR TREATMENT SITE		
American Chemical Service	Colfax Ave. & C&O	R.R.	9 1	808902
(Facility Name)	Address	Control of the Control	39	Site Number 30 344
Griffith City	IN State	46319		
TO BE COMPLETED BY				
, WASTE GENERATOR	Cantanianta			
WASTE NAME: ACECUTIE &	Contaminates			Liquid d, Gaseous, Solid)
:			,	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFE	ST IS OF THE DOT HAZARD CLASSIFICATION II	NDICATED IMMEDIATELY BEI	.OW:	
SHIPPING DESCRIPTION:	e.		HAZARD CLASS:	
		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del></del>
		:		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE (			ED AND IS IN PROPER CONDIT	ION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORM	NATION ;	1		
4/2/80	( langer &	Jarler		
DATE: 4 DI DO	(Authorized Signatu	re) ·		
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: _	2000	-	rcle One)
		47 52	·	53
METHOD OF SHIPMENT (Circle One) DR	UMS (TANK TRUCK) OPE	EN TRUCK OTHE	R (Specify)	
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WINDICATED:	ASTE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FO	R TRANSPORT AND I ACKNOWI	EDGE THE DESTINATION AS
(1) Don (+10)	<u> </u>		DATE:	<u>** */ 3 // \$ ?</u>
(Authorized Signature)	· ·		35	
(2)(Authorized Signature)	<del></del> . `		DATE	//
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	· · · · · · · · · · · · · · · · · · ·		·	
I HEREBY CERTIFY THAT THE A OVE-DESCHIBED SPECIAL WAST	E AND INDICATED QUANTITY HAS BEEN ACCE	PTED:		11 - 2
Island on			DATE: .	4, 21, 80
(Authorized Synature)				65
COMMENTS OR SPECIAL INSTRUCTIONS:				
		<del></del>		
IN ILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL A	SSISTANCE NUMBERS*		SIDE ILLINOIS 800 / 424 8802

#### TO BE COMPLETED BY STATE OF ILLINOIS WASTE GENERATOR ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. (Company Name) Kankakee Address 0910550008 IL 60901 State City WASTE HAULER(S) Kankakee Industrial Disposal 1360 E. Locust S.W.H. Registration Number 0 0 6 6 Hauler Name Hauler Address S.W.H. Registration Number 32 Hauler Address Auto Name -DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C&O R.R. IA Address 46319 (Facility Name) Griffith State of City States TO BE COMPLETED BY WASTE GENERATOR Acetone & Contaminates WASTE NAME: WASTE PHASE: THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION GALLONS (Circle One) WASTE HAULER\* QUANTITY OF WASTE RECEIVED: \_\_\_\_TANK TRUCK METHOD OF SHIPMENT (Circle One) OPEN TRUCK OTHER \_\_\_\_ I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 4/ 24/ 20

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART 4 HAULER PART 5 IEPA

DISTRIBUTION: PART | GENERATOR

SITE COPY - PART 3

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS. 217 / 782-3637

(Authorized Signature)

LHEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

PART - 6 GENERATOR

DATE: \_\_\_\_/ \_\_\_\_/ \_\_\_\_\_/

DATE 4/ 24/ 50

OUTSIDE ILLINOIS: 800 / 424-8802

#### STATE OF ILLINOIS

<u>0101358</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

portization Number 9 9 7 1 0 1

Miles Laboratories	195 W. Birch S		Authorization i	8 13
(Company Name)	Address		0910	550008
Kankakee	IL	60901	14	Generator Number 24
City	State	· Zip		•
	WASTE HAULE	ER(S)		
Vanhabaa Industrial Dianasal	1260 F 1	·	<b>4</b>	
1) Kankakee Industrial Disposal	1360 E. Locu	<u>st</u>	S.W.H. Registration Numb	er <u>0 0 6 6 0 70</u>
Hauler Name	Hauler Address			25
A-100394 Hauler Name	Hauler Address		S.W.H. Registration Num	ber
	DESTINATION — DISPOSAL STOR	AGE OR TREATMENT SITE	ree reining in the	
American Chemical Service	Colfax Ave. &	CAO R.R.		91808902
(Facility Name)	IN Address	40014		Site Number
	State Andrews	46319 Zio		A Law
TO BE COMPLETED BY	Construction of the Constr	and the second of the second of the second		
WASTE GENERATOR				
WASTE NAME: Acetone	& Contaminates	w	ASTE PHASE:	Liouid
		·		(Liquid, Gaseous, Solid)
THE CRECIAL MARYER REING TRANSCORPER HARRED THE MANUFER	T 10 05 THE DOT HAZADD OF FOREIGNATIO			· ·
HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES SHIPPING DESCRIPTION:	PL 12 OF THE DOT HAZAKO CTAZZIŁICA IIC	UN INDICATED IMMEDIATELY BEI	LOW: HAZARD CLASS:	**
Sills Find Descriptions.			TIALAND CLASS.	
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DI I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	EPARTMENT OF TRANSPORTATION.	PACKAGED, MARKED, AND LABEI	LED AND IS IN PROPER C	UNDITION FOR TRANSPORTATION,
ul alex	Kens at 211	Dusters		
DATE: 4/28/80	(Authorized Sig	nature)		
		<del></del>	GALLONS	(Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED	0: <u>4</u> 2 3 <u>1 1 2 2</u>		
		47 52		<b>'</b> 53
METHOD OF SHIPMENT (Circle One) DRU	MS TANK TRUCK	OPEN TRUCK OTHE	R(Specif	)
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAINDICATED:	STE AND QUANTITY HAS BEEN ACCEPT	TED IN PROPER CONDITION FO	R TRANSPORT AND 1 ACK	NOWLEDGE THE DESTINATION AS
19 (41A)	<b>y</b>		(	DATE: 4/ 28/ 50
(Authorized Signature)			,	54
(2)			[	DATE://
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN A	CCEPTED		4 28 80
1000	·			1
(Authorized Signature)				DATE:
(individual algorithm)				
COMMENTS OR SPECIAL INSTRUCTIONS:				
	***************************************	L ARGENTANAP WINAPPRE-		
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR PAR	*24 HOUR EMERGENCY AND SPIL T-2 IEPA PART-3 SITE		5 IEPA PART 6 GE	OUTSIDE ILLINOIS: 800 / 424-8302
DISTRIBUTION. TARE T GENERATOR PAR				

# TO BE COMPLETED BY

<u>0101359</u>

ENVIRONMENTAL PROTECTION AGENCY

	DIVISION OF LAND POLLU  SPECIAL WASTE HAULIT  WASTE GENERA	ITION CONTROL NG MANIFEST	 Authorization Number	97101
Miles Laboratories	195 W. Birch St.			13
(Company Name) <b>Kankakee</b>	Address	60901	0 9 1 0 5 5 0 Generator	0 0 8
City	State	Zıp	·	
	. • WASTE HAULER(	S) :		
(1) Kankakee Industrial Dispos	al 1360 E. Locus	<u>st</u>	S.W.H. Registration Number 0 0	66 010
Hauler Name	Hauler Address 2		25	31
(2)			S.W.H. Registration Number	
Hauler Name	Hauler Address	CONTRACTOR OF A	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	5,500 Sep. 5. 38
	DESTINATION — DISPOSAL STORAGI			
American Chembcal Service	Colfax Ave.	4 C&O R.R.	9 1 8	08902
(Facility Name) Griffith	Address	46319	39	Sile Number 46
TO BE COMPLETED BY LEAST FOR THE ANALYSIS OF THE STATE OF	A national design of property and a second second	terijatika <b>Zip</b> ala ka . Seltali katuraten		
WASTE GENERATOR				
WASTE NAME: ACE CORE	& Contaminates			quid seous, Solid)
			(24413, 30	
THE CONCINE WASTE Drive TRANSPORTED WASTE THE				
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAN SHIPPING DESCRIPTION:	VIFEST IS OF THE DOT HAZARD CLASSIFICATION	INDICATED IMMEDIATELY E	BELOW: HAZARD CLASS:	
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		-		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WA IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF T		CKAGED, MARKED, AND LAS	BELED AND IS IN PROPER CONDITION F	OR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INF				
11/20/20		Saster		
DATE: 4/30/80	(Authorized Signat			
WASTE HAULER*		-	(Circle O	ne)
	QUANTITY OF WASTE RECEIVED:	3200	2 2 53	_
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OF	PEN TRUCK OT	HER(Specify)	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIA	I WASTE AND QUANTITY HAS BEEN ACCEPTED		•	THE DESTINATION AS
INDICATED:		·	THE	
(1) (Anthorized Signature)			DATE:\$	<u>1</u> 30/ 20
(2)			DATE:	_//
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*	·		<del> </del>	·····
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL W	VASTE AND INDICATED QUANTITY HAS BEEN ACC	EPTED:		,
(Authorized Signature)		•	DATE:	1/ = 1/ = 1/ ss
,		<del></del> -		·
COMMENTS OR SPECIAL INSTRUCTIONS:				
IN ILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL			ILLINOIS. 800 / 424-8802
DISTRIBUTION. PART I GENERATOR	PART - 2 IEPA PART - 3 SITE	PART - 4 HAULER PAR	1 - 5 IEPA PART - 6 GENERATOR	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

Miles Laboratories  (Company Rame)  Kankakee  (City  State  MASTE HAULE RS)  WASTE HAULE RS)  (City  MASTE HAULE RS)  MASTE HAULE RS)  MASTE HAULE RS)  (City  (CITY  MASTER H		SPECIAL WASTE HAULI WASTE GENER/	ING MANIFEST	Authorization Number 997101
Company Tends   Notes   Notes   State   10910   10910   55000   8    City   State   10910   109   109   109   109   109   109   109   109    NASSE MANUER (MILES IN)   109   1	Miles Laboratories	195 W. Birch	St.	
CLY  WASTE MAULEN (S)  Hauler Name  Name of Maulen Andress  SWIF Registration Number of 23  SWIF Mayor (SWIF Number of 24  SWIF Maulen Number of 24  SWIF Mayor (SWIF Number of 24  SWIF Maulen Number of 24  SWIF Maulen Number of 24  SWIF Maulen Number of 24  SWIF Mayor (SWIF Number of 24  SWIF Maulen Number of 24  SWIF Mayor (SWIF Number of 24  SWIF Maulen Number of 24  SWIF Mayor (SWIF Number of 24  SWIF M		Address		
WASTE MALLER(S)  WASTE MALLER(S)  TABLET ADDRESS  WASTE MALLER (S)  SWITE REQUISITION Number  Hauter Name  Hauter Address  SWITE REQUISITION Number  SWITE REQUISITION Number  Address  SWITE REQUISITION Number  SWITE REQUISITION Number  ADDRESS STORAGE OR TREATMENT STE  DESTINATION — DEPOSAL STORAGE OR TREATMENT STE  DESTINATION — DEPOSAL STORAGE OR TREATMENT STE  PARTY CAR. CREATED STEP AND STEP				Generator Number 24
Hauler Name    Hauler Name   Hauler Address   SW.H. Registration Number   127		WASTE HAULER		
Hauler Name    Hauler Name   Hauler Address   SW.H. Registration Number   127	Pantakaa Indinamaa?			
ABBERTICAN CRESSICAL SERVICE  OLISIMATION — DISPOSAL SIGNAGE OR TREATMENT SITE  OLITICAL SITE OF THE ABOVE NAME  OLITICAL SITE OF THE ABOVE NAME  OLITICAL SITE OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HE SPECIAL WASTE READ THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.  ACCORDANCE WITH THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.  OATE HARDER OF THE ABOVE NAMED SPECIAL WASTE AND QUANTITY OF WASTE RECEIVED.  WASTE HAULER.  QUANTITY OF WASTE RECEIVED.  OATE			<u>cust</u>	S.W.H. Registration Number 0 0 6 6 0 / 0
DESTINATION — DISPOSAL STORAGE OR TREATMENT STE  DESTINATION — DISPOSAL STORAGE OR TREATMENT STE  PASSETICAN. Chemical Service  Colfax Ave. 2 C&O R.R.  Service  Colfax Ave. 3 C&O R.R.  Sin Number  Address  Service  State  Jop  To be completed by  WASTE NAME:  Acetone & Contaminates  Acetone & Acetone & Contaminates  Acetone & Acetone & Contaminates  Acetone & Acetone & Acetone  Acetone & Acetone & Acetone  Acetone & Contaminates  Acetone &		RA SOLL		
DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE  AMERICAN, Chemical Service  Colfax Ave. & C60 R.R.  9 1 8 0 8 9 0  Matrix  Matrix  Matrix  Colfield No. Ship  To be completed by  MASTE NAME  Acetore & Contaminates  Waste Phase  (Liquid, Garagus, Solid)  (Liquid, Garagus, Solid)  (Liquid, Garagus, Solid)  (Liquid, Garagus, Solid)  ITHE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW  SHIPPING DESCRIPTION  MAZARD CLASS  HAZARD CLASS  HAZARD CLASS  ITHE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW  SHIPPING DESCRIPTION  MAZARD CLASS  HAZARD CLASS  ITHE SPECIAL WASTE BEING TRANSPORTED UNDER THE DEPARTMENT OF TRANSPORTATION.  I HEREBY AGREE 10 AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE OF THE PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION  (Authorized Signature)  (Authorized Signature)  DATE OF THE LIGHT THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION  (Authorized Signature)  DATE OF THAT THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED  DATE OF THAT THAT THE ABOVE SIGNATURE  (Authorized Signature)  DATE OF THAT THAT THE ABOVE SIGNATURE  DATE OF THAT THAT THE ABOVE SIGNATURE  DATE OF THAT THAT THE ABOVE SIGNATURE  (Authorized Signature)  DATE OF THE SIGNATURE  (Authorized Signature)  DATE OF THE SIGNATURE  (Authorized Signature)  DATE OF THE SIGNATURE  DATE	(2)			S.W.H. Registration Number
ABBERTICAN CLIEBICAL SERVICE  COLFAX AVE. & CEO R.R.  SET IFFECT  Fraility Name)  SIN Number  Address  SIN Number  Address  SIN Number  WASTE NAME  ACCORD & SINE  ACCORD & SINE  ACCORD & CONTAMINATE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW  SHIPPING DESCRIPTION.  WASTE NAME  ACCORD & CONTAMINATE IS PROPERLY CLASSIFICATION INDICATED IMMEDIATELY BELOW  SHIPPING DESCRIPTION.  WASTE NAME ACCORDANCE WITH THE AFFICIABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.  HAZARD CLASS  WASTE HADLER*  QUARTITY OF MASTE RECEIVED:  QUARTITY OF MASTE RECEIVED:  QUARTITY OF MASTE RECEIVED:  ACALDING CALCURATE  QUARTITY OF MASTE RECEIVED:  ACALDING CALCURATE  (Specify)  METHOD OF SHIPMENT (Circle One)  DRUMS  AND THE ADDRESS SERVICED  ACALDING SERVINDING  (Authorized Service)  ACALDING CIRCLE TO AND CARRY THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND LAKENOWICEDEE THE DESTINATION  (Authorized Service)  ACALDING CIRCLE TO AND CARRY THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED.  DATE  (Authorized Service)	Programme and Commission and Commiss		SE OR TREATMENT SITE	The second of th
SIR Number 46319  State 7.0  Stat				
TO BE COMPLETED BY MASTE CRIMEN ACCEDING.  WASTE NAME. ACCEDING & CONTAININATES  WASTE NAME. ACCEDING & CONTAININATES  WASTE NAME. ACCEDING & CONTAININATES  WASTE PHASE. 10016  (Liquid, Gáseidas, Solid)  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HAZARD CLASS.  WASTE PHASE. 10016  (Liquid, Gáseidas, Solid)  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HAZARD CLASS.  WASTE HAULER AROVE NAMED SPECIAL WASTE IS PROPERTY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.  HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE AND LABOUR WRITTEN INFORMATION  WASTE HAULER.  QUANTITY OF WASTE RECEIVED:  QUANTITY OF WASTE RECEIVED:  QUANTITY OF WASTE RECEIVED:  QUANTITY OF WASTE RECEIVED IN PROPER CONDITION FOR TRANSPORT AND LACKNOWLEDGE THE DESTINATION (CONTENTION)  DATE AND LACKNOWLEDGE THE DATE AND LACKNOWLEDGE THE DESTINATION (CONTENTION)  DATE AN		Colfax Ave.	& C&O R.R.	91808902
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WASTE NAME: Acetone & Containinates  Waste Phase: 110uld (Liquid, Gasous Solid)  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION:  HAZARD CLASS.  HAZARD			STEEL STEEL STEEL	
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SHIPPING DESCRIPTION:  HAZARD CLASS:  HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLASS: HAZARD CLAS				
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I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  (Authorized Signature)  (Authorized Signature)  (Authorized Signature)  (Circle One)  (Circle One)  (Authorized Signature)  (Circle One)  (Circle One)  (Authorized Signature)  (Circle One)  (Authorized Signature)  (Circle One)  (Authorized Signature)  (Circle One)  (Circle One)  (Authorized Signature)	· .			
MASTE HAULER*  QUANTITY OF WASTE RECEIVED: 300 0  METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION (Circle One)  QUANTITY OF WASTE RECEIVED: 300 0  TANK TRUCK OPEN TRUCK OTHER (Specify)  DATE: 100 0  QUANTITY OF WASTE RECEIVED: 300 0  TO YOUR OTHER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION OF THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION OF THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.  (Authorized Signature)  DATE: 100 0  CAUTHORIZED SIGNATURE)  DATE: 100 0  DATE:	THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS	PROPERLY CLASSIFIED, DESCRIBED, PA	ACKAGED, MARKED, AND LABEL	ED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
MASTE HAULER*  QUANTITY OF WASTE RECEIVED:  AT 3 D D ST COLUMNS. (Circle One)  METHOD OF SHIPMENT (Circle One)  DRUMS  TANK TRUCK  OPEN TRUCK  OPEN TRUCK  OTHER  (Specify)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION  (Authorized Signature)  (Authorized Signature)  DATE:  (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)			0	
MASTE HAULER*  QUANTITY OF WASTE RECEIVED:	THEREBY AGREE TO AND CERTIFY THE ABOVE WHITTEN INFORMAL	IIIII ( ) as at a las	Talker	·
MASTE HADLEN  QUANTITY OF WASTE RECEIVED:	DATE 5/14/80	(Authorized Signa	iture)	
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER	WASTE HABIEDS			GALLONS (Circle One)
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER	WASTE HADLEN	QUANTITY OF WASTE RECEIVED:	3000	2 cu. vos
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION INDICATED.  DATE:  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)	METHOD OF CHIRMSNEE (Cont. Onl)			D 40 4 1
DATE:  1)				,,
1)		TE AND QUANTITY HAS BEEN ACCEPTE	D IN PROPER CONDITION FO	R TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(Authorized Signature)  DATE:  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:  DATE:	KW. Miller			5 1/4 P
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:	(Authorized Signature)	<del>_</del>		DATE
DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  (Authorized Signification of the company of	(2)	<del></del>		DATE://
HEREBY CERTIFY THAT THE ABOVE OF SCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  (Authorized Signibulie 1 7 7 7 80 0000000000000000000000000000				· ·
(Authorized SigneyAre V 7 / 7 / 200	DISPOSAL, STORAGE, OR TREATMENT FACILITY			
(Authorized SigneyArie ) 7 7 7 7 9	7.3	AND INDICATED QUANTITY HAS BEEN AC	CEPTED:	رام المار المسلم
				DATE:
COMMENTS OR SPECIAL INSTRUCTIONS:	(Authorized Signature 777		<del></del>	00 . [5] 03
	COMMENTS OR SPECIAL INSTRUCTIONS:			
<u> </u>	<u> </u>			
N ILLINOIS. 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS. 800 / 4	a	274 HOUR EMERCENCY AND CO	ACCICTANCE NUMBEROS	OUTSIDE ILLINOIS. 800 / 424-880

TO BE COMPLETED BY WASTE GENERATOR	STATE OF I ENVIRONMENTAL PRO DIVISION OF LAND POL SPECIAL WASTE HAU WASTE GENE	TECTION AGENCY LLUTION CONTROL ILING MANIFEST	Authorization	$     \begin{array}{ccccccccccccccccccccccccccccccccc$
- Miles Laboratories	195 W. Birc	h St.		
(Company Name) <b>Kankakee</b>	Address	60901	0910	0 5 5 0 0 0 8 G
City	State			Generator Number 24
	WASTE HAUL	ER(S)		
() Kankakee Industrial Disposal	1960 E. Loc	UST	S.W.H. Registration Num	nn 4 = 0/0
Hauler Name	Hauler Address		5. W.H. Registration Nur	25 31
(2) Hauler Name	Hauler Address		S.W.H. Registration Nu	nber
	DESTINATION — DISPOSAL STOR	RAGE OR TREATMENT SITE		
Ameriman Chemical Service	Colfax Ave. &	C&O R.R.		91808902
(Facility Name)	Address			39 Site Number 46
Market Constitution of the	State Services	46319 Zip		
TO BE COMPLETED BY			X26200 000	
WASTE GENERATOR WASTE NAME: Acetone &			WASTE PHASE:	Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST SHIPPING DESCRIPTION:		ON INDICATED IMMEDIATEL	Y BELOW: HAZARD CLASS:	
				•
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DELINEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAD DATE 5/19/80	PARTMENT OF TRANSPORTATION.	Barber	ABELED AND IS IN PROPER	CONDITION FOR TRANSPORTATION.
WASTE HAULER*	₹ QUANTITY OF WASTE RECEIVE	0:300	0 2 CU. 105.	(Circle One)
METHOO OF SHIPMENT (Circle One) DRUM	MS TANK TRUCK	OPEN TRUCK	OTHER(Speci	iy)
1 HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:  (1) (Authorized Signature)	STE AND QUANTITY HAS BEEN ACCEP	TED IN PROPER CONDITION		DATE 54 / 19 / 80
(2)(Authorized Signature)	<del>_</del>		·	DATE://
DISPOSAL, STORAGE, OR TREATMENT FACILITY				
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN A	ACCEPTED:		DATE: 5-1 19 80

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART 1 GENERATOR

SITE COPY - PART 3

COMMENTS OR SPECIAL INSTRUCTIONS:

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS \* OUTSIDE ILLINOIS: 800 / 424 8802

PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

<u>0101362</u>
Authorization Number 9 9 7 1 0 1 10 9 9 1 0 5 5 0 0 0 8 6 Generator Number 24
gistration Number $\frac{0}{25}$ $\frac{0}{5}$ $\frac{6}{6}$ $\frac{6}{0}$ $\frac{0}{31}$ egistration Number $\frac{32}{32}$
9 1 8 0 8 9 0 2 39 Site Number 46
SE: Liquid (Liquid, Gaseous, Solid)

WASTE GENERATOR 195 W. Birch St. Miles Laboratories (Company Name) Address Kankakee 60901 IL State City WASTE HAULER(S) Kankakee Industrial Disposal 1360 E. Locust Hauler Name Hauler Address Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE & C&O R.R American Chemical Service (Facility Name) Address Indiana Zio . TO BE COMPLETED BY WASTE GENERATOR Acetone & Contaminates WASTE NAME: \_ WASTE PHAS THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION GALLONS (Circle One) WASTE HAULER\* QUANTITY OF WASTE RECEIVED: METHOD OF SHIPMENT (Cycle One) DRUMS OTHER\_ \_\_ (Specify) I HEREBY CERTIFY THE THE BOY DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE 5 / Z/ 80 (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED. (Authorized Sanatule) COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - L GENERATOR

PART 6 GENERATOR

<u>0101363</u>

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY

•	DIVISION OF LAND POLLUT		خي ر	,
	SPECIAL WASTE HAULING WASTE GENERATO	/	without ation h	Jumber 9 9 7 1 0 1
Miles Laboratories	195 W. Birci	1 1		8 . 13
(Company Name)	Address		0 9 1 0	5 5 0 0 0 8
Kankakee	<u> </u>	60901	14	Generator Number 24
City	State • WASTE HAULER(S)	Zip	<del></del>	<del></del>
(1) Kankakee Industrial Disposal		<del></del>	S.W.H. Registration Numb	er 0 0 6 6 0/0
Hauler Name	Hauler Address		*	25 31
(2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4			S.W.H. Registration Num	her .
Streftwickton Hauler Name	Hauler Address	6213.569	1. 10. 10. 10. 10. 10. 10. 10. 10. 10. 1	32 <u>2000</u> 38
	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE		
American Chemical Service	Colfax Ave.	& C&O R.R.		91808902
(Facility Name)	Address	2010		39 Site Number 46
Griffith City	State Control State	46319		
TO BE COMPLETED BY		12.50	Marie to the state of the said	
WASTE GENERATOR				
WASTE NAME: Acetone &	Contaminates	<b>W</b>	ASTE PHASE:	Liquid (Liquid, Gaseous, Solid)
		100 miles (100 miles)	₹ °	, , , , , , , , , , , , , , , , , , , ,
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIF SHIPPING DESCRIPTION:	EST IS OF THE DOT HAZARD CLASSIFICATION IN	IDICATED IMMEDIATELY BE	.LOW: HAZARD CLASS:	
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	<del></del>	_	<del></del>	<del></del> .
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE		AGED, MARKED, AND LABE	LED AND IS IN PROPER C	ONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR		0		
// -/-	busia	Sus local		,
DATE: 6/3/80	(Authorized Signatur	re)		
WASTE HAULER*		2 ~~	1 GALLONS	(Circle One)
	QUANTITY OF WASTE RECEIVED:	<u> SOU)</u>	_	53
METHOD OF SHIPMENT (Circle One)	RUMS TANK TRUCK OPE	N TRUCK OTH	ER(Specif	y)
I HEBERY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL V				
INDICATED:	THOSE AND QUARTITY THAT DEEM MODEL TED	·	on many on and I ac	/ Destination, as
(1) The X (1/15/5)	)			DATE: 6 3 30
(Authorized Synature)	<del></del>			50 9
(Authorized Signature)	<del></del>	ب. بر. ب. بر.		DATE://
DISPOSAL, STORAGE, OR TREATMENT FACILITY				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND INDICATED GUANTITY HAS REEN ACCEP	PTED.		, .
THEREOF CENTER I THAT THE ABOVE DESCRIBE COME WAS	TE THE INDICATES AND ALL THE SELL HOLL			DATE:
TANGETON SENTENCE	<del></del>			JAIL:

COMMENTS OR SPECIAL INSTRUCTIONS:

"24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" IN ILLINOIS. 217 / 782-3637 DISTRIBUTION: PART I GENERATOR PART - 2 IEPA PART - 3 SITE PART 4 HAULER PART 5 IEPA

OUTSIDE ILLINOIS 800 / 424-8802

SITE COPY - PART 3

PART - 6 GENERATOR

<u>0101364</u> TO BE COMPLETED BY STATE OF ILLINOIS WASTE GENERATOR ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. (Company Name) Address Kankakee IL 60981 State WASTE HAULER(\$) Kankakee Industrial Disposal 1360 E. Locust S.W.H. Registration Number 0 0 6 6 0 1 0 Hauler Name Hauler Address S.W.H. Registration Number Hauler Address Fr - 2: Hauler Name 😁 DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C&O R.R. (Facility Name)
Griffith IN Address 46319 State State TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: Acetone & Contaminates Liquid -WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) GALLONS ) (Circle One) WASTE HAULER\* QUANTITY OF WASTE RECEIVED: METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

DATE: \_ 6/ \_5/ \_50

(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: I HEREBY CERTIFY THAT THE ABOV

DATE: LOV 5/ 85

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS 800 / 424-8802

PART - 2 IEPA PART - 5 IEPA PART - 6 GENERATOR DISTRIBUTION PART I GENERATOR

#### STATE OF ILLINOIS

<u>0101365</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLITION CONTROL

IVISION OF I	AND POLLU	TION CONT	ROL 1:M	$\mathcal{N}$											
SPECIAL WA	ASTE HAULII	NG MANIFES	$U_{\mathcal{N}}$	) ·					0	٥	7	1	Λ	1	
	WASTE GENERA	TOR	1120°	Author	izatio	n No	ambe	ſ	<del>-</del> -			. <u>-</u>		┵╌	<del>-</del>
195	W. Birc	n St.	Ko						٠	•					,
	Address		<b>T</b>	0.8	-1	0	5	5	0	0	0	8			G
IL	٠	60901		14			Gen	erai	lor N	umb	er			7	4

	WASTE GEN		Authorization	Number 9 9 7 1 0 1
Hiles Laboratories	195 W. Bf	rch St. X		
(Company Name)	Address			) 5 5 0 0 0 8 <sub>G</sub>
<u>Kankakee</u>	State		14 :	Generator Number 24
ut)	WASTE HAU		<del></del>	
Samuel Commission of the Commi		1	•	· · · · · · · · · · · · · · · · · · ·
(1) Kankakee Industrial Disposal	1360 E. Locus	St Contract	S.W.H. Registration Num	ber 0 0 6 6 - 0 / 0
naulei Name	Hauler Address			
(2)		<del> </del>	S.W.H. Registration Nun	nber
Hauler Name	Hauler Address DESTINATION — DISPOSAL STO	DACE OR TREATMENT SITE	en egañ e marea	38
	DESTINATION - DISPUSAL STO	RAGE ON TREATMENT SITE		
American Chemical Service	Colfax A	re. & C&O R.R.		91808902
(Facility Name) Griffith	Address	46319		39 Site Number 46
No. 2. September 2018 And William City of the Control of the Contr	State of Contract State	20015 - 40315		
TO BE COMPLETED BY	· - - - - - - - - - - - - - - - - - - -		<b>产的发生的 各项</b>	STATE OF THE STATE
WASTE GENERATOR	& Contaminates			
WASTE NAME: Acetone	a concaminaces	\	ASTE PHASE:	(Liquid, Gaseous, Solid)
		_		
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	THE OF THE DOT HAZADD OF ACCIDION	ION INDICATED WHITE DATE Y DE		
SHIPPING DESCRIPTION:		, , , , , , , , , , , , , , , , , , , ,	HAZARD CLASS:	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEF	PARIMENT OF TRANSPORTATION.	PACKAGED, MARKED, AND LABE	LED AND IS IN PROPER C	ONDITION FOR TRANSPORTATION,
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	(Authorized Si	Barber		
77	(Authorized 2)		1 GALLONS	(Circle One)
WASTE HAULER'	QUANTITY OF WASTE RECEIVE	3000	2 0. 103.	1
		47 52		53
METHOD OF SHIPMENT (Circle One) DRUN			ER(Speci	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCE	PTED IN PROPER CONDITION FO	OR TRANSPORT AND I AC	KNOWLEDGE THE DESTINATION AS
£ (1) Sm. 00.		<b>4</b>		DATE: 6 / 9 / 80
(1) (Authorized Signature)	<del></del>	+ er		DATE: 1 2 59
(2)	<del></del>			DATE://
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			-	
I HEREBY CERTIFY THATTHE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN	ACCEPTED:		
Walkan				DATE: 1 7 1 1 AS
James Land Land Land Land Land Land Land Land				7 4 20
COMMENTS OR SPECIAL INSTRUCTIONS:	<del></del>	<del></del>		!
	· · · · · · · · · · · · · · · · · · ·			
IN ILLINOIS: 217 / 782-3637	124 HOUR EMERGENCY AND SP	ILL ASSISTANCE NUMBERS*		OUTSIDE ILLINOIS: 800 / 424-8802
	I - 2 IEPA PART - 3 SITE		- 5 IEPA PART - 6 G	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

Reclaim 0101366

- a.	WASTE GENERA	OR .	Authorization Number 997	<u> 10</u>
Miles Laboratories	- 195 W. Birch	St.	•	
(Company Name) <b>Kankakee</b>	Address	60001	0 9 1 0 5 5 0 0 Generator Number	080
City	- State	60901 -	Generator number	2
	WASTE HAULER(	S)		
Kankakee Industrial Disposal	1360 E. Locust	The second second	ersterne For entropy so so the end of the first	011
Hauler Name	Hauler Address	<u>*                                    </u>	W.H. Registration Number 0 0 6 6	77
		gradicija statisti i digi. Historija statisti i digi.		
(2) Hauler Name	Hauler Address 🧸		S.W.H. Registration Number 32	3
	DESTINATION — DISPOSAL STORAG	OR TREATMENT SITE		
American Chemical Service	Colfax Ave. &	CAO D D		
(Facility Name)	Address	WASSELL SELECTION OF THE SELECTION OF TH	9 1 8 0 8 39 Site Number	A DOG
Griffith	IN The State	46319 Zio		3
TO BE COMPLETED BY	Secretary Suite of Secretary	un men und Kimberier Einmer Willer		o service. Selicitati
WASTE GENERATOR				
WASTE NAME: ACE TONE &	Contaminates	WA	STE PHASE: Liquid (Liquid, Gaseous, Solid)	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
اب THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	LIS OF THE DOT HAZARD CLASSIFICATION	INDICATED IMMEDIATELY REL	nw-	
SHIPPING DESCRIPTION:			HAZARD CLASS:	
		_		
	\$ <del>\\$</del>			
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS			TO AND IS IN PROPER CONDITION FOR TRANSPOR	MULTATION
N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.		S AND IS IN THAT EN CONDITION TON HANDS OF	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION			
DATE 6/11/80	JENNYN!	Barber		
Unit.	(Authorized Signat	ure)	(T GALLONS) (Circle One)	
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	3000	2 CU. YUS. 1	
NETHOD OF CHIOMENT (O'   Q )	AS TANK TOUGH	47 . 32	53	
METHOD OF SHIPMENT (Circle One) DRUM			(Specify)	
I HEREBY CERTIFY) THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTIN	ATION AS
o Kill Miller			DATE: 6 / //	,80
(Authorized Signature)			54	59
(2)(Authorized Signature)			DATE://	
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			. <del>- · · · · · · · · · · · · · ·</del>	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACC	EPTED:		
x Allendon			DATE: 61/4	97
1 Collimpared haty	<del></del>			<del></del>
COMMENTS OR SPECIAL INSTRUCTIONS:				
	es es			
WWW.W. 2017 (2027)	24 HOUR EMERGENCY AND SPILL	A 2 2 12 TANCE NIIMBER 2*	Autore in those sea	1 / 12 / 02
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - L GENERATOR PART		PART 4 HAULER PART -	OUTSIDE ILLINOIS: 800 IEPA PART 6 GENERATOR	1 / 424 38

### STATE OF ILLINOIS

0101367

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

7 --- 7

Authorization Number 9 9 7 1 0 1 Miles Laboratories , 195 W. Birch St. (Company Name) Address Kankakee IL 60901 City WASTE HAULER(S) (1) Kankakee Industrial Disposal S.W.H. Registration Number 0 0 6 6 Hauler Address ` S.W.H. Registration Number 32 Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C&O R.R. (Facility Name) Address 46319 Griffith State Color of First TO BE COMPLETED BY WASTE NAME: Acetone & Contaminates (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED N FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) GALLONS (Circle One) **WASTE HAULER** 3000 QUANTITY OF WASTE RECEIVED: \_ METHOD OF SHIPMENT (Circle One) TANK TRUCK DRUMS I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: \_ ( 12/ 80 (Authorized Signature) DISPOSAL STORAGE, OR TREATMENT FACILITYS I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY: HAS BEEN ACCEPTED: DATE \_ 6 \_ 1 \_ 7 \_ 8 0 (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 IN ILLINOIS: 217 / 782-3637 PART - 2 IEPA PART - 4 HAULER PART - 5 IEPA DISTRIBUTION: PART I GENERATOR PART 6 GENERATOR

#### STATE OF ILLINOIS

<u>0101368</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

Authorization Number 997101

	MASIE GENERATOR	•	70110112011011110111011	8
Miles Laboratories (Company Name)	195 W. Birch St. Address			50000
• • •		60001		5 0 0 0 8 G
Kankakee City	IL State	60901	: General	or number 24
	WASTE HAULER(S)			<del></del>
	*	•		
(1) Kankakee Industrial Disposal	1360 E. Locust		. Registration Number0	066 010
Hauler Name -	Hauler Address	minima de la composição	25	31
(2) Hauler Name	Hauler Addgess	S.W.	H. Registration Number	
Trailer Haller Haller	DESTINATION — DISPOSAL STORAGE OF	TREATMENT SITE		7 3
		A-AV-VA		
American Chemical Service	Colfax Ave. & Ca	O R.R.		1808902
(Facility Name)	Address		39	Site Number
Griffith	IN	46319		
and the state of t	State Transfer and The	rangum Zip daga ya Tabili		
TO BE COMPLETED BY WASTE GENERATOR			<b>建筑设置</b>	<b>为相位别为</b> 证
WASTE NAME: Acetone & C	ontaminates	WASTE F		aseous, Solid)
			(Edding, C	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARO CLASSIFICATION IND	CATED IMMEDIATELY BELOW:		• ,
SHIPPING DESCRIPTION:		X H	AZARD CLASS:	•
	·	<del></del> -	<del></del>	
			n 6	
	<del></del> ·			~
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS	PROPERLY CLASSIFIED, DESCRIBED, PACKAC	GED, MARKED, AND LABELED AI	VD IS IN PROPÈR CONDITION	FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEP	ARTMENT OF TRANSPORTATION.	. ( )	$^{\prime}$	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION .	2	190/	
1 Laba	Conora D	when I		
DATE: 6/19/80	(Authorized Signature)		7	
WASTE HAULER*			GALLONS (Circle	One)
· ·	QUANTITY OF WASTE RECEIVED:	43000	Z CO YUS:	<b>⊢</b> ″ ,•
,	Carry Square			;
METHOD OF SHIPMENT (Circle One) DRUM	S TANK TRUCK OPEN	TRUCK OTHER	(Specify)	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAST	TE AND QUANTITY HAS BEEN ACCEPTED IN	PROPER CONDITION FOR TRA	NSPORT AND I ACKNOWLED	GE THE DESTINATION AS
INDICATED:	5.4		. ,	
(1) Dalikin)			DATE	F1 131 33
(Authorized Signature)		<i>*</i>		•
(2)			DATE.	_//
(Authorized Signature)				<del></del>
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SECIAL WASTE A	ND INDICATED QUANTITY HAS BEEN ACCEPT	ED:	•	
I Dungea			Date 4	e 19 80
(Authorized Signature)	<del></del>		DATE	- F- 4 - 65
•				
COMMENTS OR SPECIAL INSTRUCTIONS:				
		<del></del>		
	*24 HOUR EMERGENCY AND SPILL ASS	ISTANCE NUMBERCE	Outs:0	E H I I NO 10 0000
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION PART 1 GENERATOR PART		1 . 4 HAULER PART - 5 IEP		E ILLINOIS. 800 / 424-8802

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

<u>0101369</u>

Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. 0910550008 (Company Name) Kankakee IL 60901 WASTE HAULER(S) 1360 E. Locust Kankakee Industrial Disposal S.W.H. Registration Number 0 6 6 0 10 Hauler Name Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE Colfax Ave. & C & O R.R. American Chemical Service (Facility Name) Address 46319 City Harris City Appears of State Invitation (Conference) TO BE COMPLETED BY WASTE GENERATOR 🐔 Acetone & Contaminates WASTE NAME. WASTE PHASE: \_ (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: -HAZARD CLASS THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) GALLONS (Circle One) **WASTE HAULER\*** 2 CU. YDS. METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER \_\_\_\_\_ (Specify) I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: \$ 61 3 11 80 Authorized Signature) DATE: \_\_\_\_/ \_\_\_\_/ (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITYS THE AROVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: DATE: - 25 & COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

PART - 4 HAULER

PART - 5 IEPA

PART - 3 SITE

IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR

PART - 6 GENERATOR

OUTSIDE ILLINOIS: 800 / 424-8802

#### STATE OF ILLINOIS

<u>0101370</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR

Authorization Number 997101

(Company Name)	195 N. Bir	ch St	
Kankakee	Address <b>IL</b>		0 9 1 0 5 5 0 0 0 8 Generator Number
City	State	60901	Generator Number
NATURE OF THE PROPERTY OF THE	* WASTE HAULER(S	<u>-</u>	
Vanhahaa Tadustud 3 nt			
Kankakee Industrial Disposal	1360 E. Locust Hauler Address	<del></del> .	S.W.H. Registration Number 0 0 6 6
naute Name	natiet Address		CWH Contaction Number
New York Constitution Name of the Property of the Constitution of	Hauler Address		S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE	
		4	-)~
merican Chemical Service (Facility Name)	Colfax Ave. & C 8	ORR.	39180890
Griffith	IN	46319	Site number
ক্ষাৰ্থক কৰিছে কিন্তু কৰিছে City ক্ষিত্ৰ ক্ষিত্ৰ কৰিছে ক	State 3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	- Zip	
BE COMPLETED BY			
WASTE NAME: Acetone &	Contaminates		WASTE PHASE: 1 1 and d
	1.		(Liquid, Gaseous, Solid)
	······································		
SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS C	OF THE DOT HAZARD CLASSIFICATION IF	VNICATEN IMMENIATEI	Y RELOW-
SHIPPING DESCRIPTION:	THE DOT HALAND OLIGINICATION II	TOTORIED IMMEDIATE	HAZARD CLASS:
	-	•	<del></del>
IS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PRO ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART	– DPERLY CLASSIFIED, DESCRIBED, PACK MENT OF TRANSPORTATION.	(AGED, MARKED, AND I	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART IEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	MENT OF TRANSPORTATION.  Demora L	Parter	
IS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 439/66 7/1/80	MENT OF TRANSPORTATION.	Parter	
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	MENT OF TRANSPORTATION.  Jensey (Authorized Signatu	Parter 1e).	GALLONS (Circle One)
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ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  BEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 5/30/60 7/1/80  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE ADDICATED:	QUANTITY OF WASTE RECEIVED:	Parker (-300	CALLONS (Circle One)  2 CU. YDS. 1  53  OTHER (Specify)  N FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION
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ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  BEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 1996 7/180  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AD  DICATED: (Authorized Signature)	QUANTITY OF WASTE RECEIVED:	Parker (-300	OTHER(Specify)  DATE:(Circle One)  1
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  EREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 5/39/80 7/1/80  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AD  DICATED:  (Authorized Signature)	QUANTITY OF WASTE RECEIVED:	Parker (-300	CALLONS (Circle One)  2 CU. 7DS. 1  53  OTHER (Specify)  N FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  EREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 5/39/60 7/1/80  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE ADICATED:  (Authorized Signature)	QUANTITY OF WASTE RECEIVED:	Parker (-300	OTHER(Specify)  DATE:(Circle One)  2 CU. TDS
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ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 1996 7/180  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A  IDICATED:  (Authorized Signature)	QUANTITY OF WASTE RECEIVED:  TANK TRUCK  OPE	Darber  10)  3 0 0  EN PRUCK  IN PROPER CONDITION	OTHER(Specify)  DATE:/  DATE:
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART  IEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  DATE: 1996 7/180  ASTE HAULER*  METHOD OF SHIPMENT (Circle One) DRUMS  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE ADICATED:  (Authorized Signature)  (Authorized Signature)  SPOSAL STORAGE, OR TREATMENT FACILITY*	QUANTITY OF WASTE RECEIVED:  TANK TRUCK  OPE	Darber  10)  3 0 0  EN PRUCK  IN PROPER CONDITION	OTHER(Specify)  DATE:///  DATE:///
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#### STATE OF ILLINOIS

0101371

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. (Company Name) Address 0 9 1 0 5 5 0 0 0 8 G Generator Number 24 Kankakee IL 60901 City State WASTE HAULER(S) (I) Kankakee Industrial Disposal 1360 E. Locust Registration Number 00660/0 Hauler Name Hauler Address .W.H. Registration Number Hauler Name Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT S American Chemical Service Colfax Ave. & C & O R.R. (Facility Name) Address Griffith 46319 State ' Table 1998年(新华大学会)第City 1997年(1997年) TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: Acetone & Contaminates WASTE PHASE: THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION GALLONS ) (Circle One) **WASTE HAULER®** QUANTITY OF WASTE RECEIVED: METHOD OF SHIPMENT (Circle One) TANK TRUCK DPEN TRUCK OTHER\_ (Specify) I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED DATE: 7\_1 1/80 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIALWASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8302 IN ILLINOIS: 217 / 782-3637 PART 4 HAULER PART S IEPA DISTRIBUTION: PART - L GENERATOR PART 3 SITE

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#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST, **WASTE GENERATOR** Hiles Laboratories 195 W. Birch St. (Company Name) Address 910550008 Kankakee IL 60901 Generator Number City WASTE HAULER(S) (1) Kankakee Industrial Disposal 1360 E. Locust S.W.H. Registration Number 00660/ Hauler Name Hauler Address S.W.H. Registration Number DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C&O R.R. (Facility Name) 46319 TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: Acetone & Contaminates WASTE PHASE: iouid THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature ( GALLONS (Circle One) WASTE HAULERS QUANTITY OF WASTE RECEIVED: METHOD OF SHIPMENT (Circle Ogé) DRUMS TANK TRUCK **OPEN TRUCK** OTHER \_\_\_\_ I HEREBY CERTIFY MA) THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED DATE: 2 9 80 (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY" I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: DATE: 1 9 70 (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS:

DISTRIBUTION: PART I GENERATOR SITE COPY - PART 3

IN ILLINOIS. 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424 3302

TO BE COMPLETED BY WASTE GENERATOR	STATE OF ILLINOIS		0101373
	ENVIRONMENTAL PROTECTION DIVISION OF LAND POLLUTION (	AGENCY CONTROL A	, ,
	SPECIAL WASTE HAULING MA WASTE GENERATOR	NIFFST	ation Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St	\ 1\2\\'\ <sup>-</sup>	8 . 13
(Company Name) <b>Kankakee</b>	Address	0	9 1 0 5 5 0 0 0 8 G Generator Number 24
City	State	0901 Table 14	Generator Number 24
	WASTE HAULER(S)		
(1) Kankakee Industrial Disposal	1360 E. Locust		0055010
Hauler Name	Hauler Address	S.W.H. Registration	Number 0 0 6 6 0 / 0
(2) Hauler Name	Hauler Address	S.W.H. Registration	Number
	DESTINATION — DISPOSAL STORAGE OR TREA	TMENT SITE	
American Chemical Service	Colfax Ave. & C&O R		
(Facility Name)	Address	·K·	9 1 8 0 8 9 0 2 Site Number 46
Griffith		6319 Zip	
TO BE COMPLETED BY	- 4	And the second of the second o	
WASTE GENERATOR			
WASTE NAME: Acetone	Contaminates	WASTE PHASE.	(Liquid, Gaseous, Solid)
	· · · · · · · · · · · · · · · · · · ·		(capacity sound)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARD OF ASSISTATION INDICATE	D IMMEDIATELY BELOW	
SHIPPING DESCRIPTION:	4	HAZARD CLASS:	
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THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS	PROPERTY CLASSIFIED DESCRIBED PACKAGED N	AARKED AND LARESED AND IS IN DOOR	PED COMMITTION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEF		INMED, AND ENDEED AND IS IN I NO	EN CONDITION FOR HOMES OR INTON,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT			
DATE: 7/15/80	Genora Bar	ber/le	•
	(Authorized Signature)		ONE (Carlo One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	3000 2 W. Y	JNS (Circle One)
	47	52	53
METHOD OF SHIPMENT (Circle One) DRUM			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:	TE AND QUANTITY HAS BEEN ACCEPTED IN PROP	ER CONDITION FOR TRANSPORT AND	I ACKNOWLEDGE THE DESTINATION AS
of PM-	•		DATE. 7 1 25 80
(Authorized Signature)	<del></del>		UAIE. 34 / 2 59
(2) (Authorized Signature)	<del>_</del> ` • ,		DATE://
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			· · · · · · · · · · · · · · · · · · ·
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL ASTE	IND INDICATED DIJANTITY HAS DEEN ACCEPTED		,
THEREBY CERTIFY THAT THE ROUTE DE DE SI COME USE	The motorical dominant may been access too.	•	DATE: 2 15 80
(Authorized Signature)			DATE: 2 7 7 7 65
COMMENTS OR SPECIAL INSTRUCTIONS:	Y**		
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IN ILLINOIS: 217 / 782-3637			
	*24 HOUR EMERGENCY AND SPILL ASSISTANT 2 IEPA PART - 3 SITE PART - 4 H		OUTSIDE ILLINOIS: 800 / 424-8802 6 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

<u>0101374</u>

	SPECIAL WASTE HAULING MAN WASTE GENERATOR	NIFESTAuthoriza	pen Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St.		8 . 13
(Company Name)	Address		910550008
Kankakee	IL 60	901( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9 1 0 5 5 0 0 0 8 G
City	State	Zip	······································
	WASTE HAULER(S)		
1) Kankakee Industrial Disposal	1360 E. Locust	SWILL BUSINESS	Number 0 0 6 6 0 / 0
Hauler Name	Hauler Address	- V _S.W.H. Registration i	25 3
(2)	A Supplied to the Control	S.W.H. Registration	Number
The Armedian of Hauler Name of American ACT (1997) for a community of the	Hauler Address DESTINATION — DISPOSAL STORAGE OR TREAT		가용하는 1 <b>32</b>
	DESTRUCTION — DISTORAGE ON TREAT	ment site	
American Chemical Service	Colfax Ave. & C&O	R.R.	91808902
(Facility Name)	Address Address	<b>公司</b> 法的证据,是是	39 Site Number
Griffith		319	
O BE COMPLETED BY	and State of State of the State	් <b>410</b>	· 改造資本 根本組織 医自己病 表籍 1 年27
WASTE GENERATOR			
WASTE NAME: Acetone & Con	taminates	WASTE PHASE:	Liquid
			(Liquid, Gaseous, Solid)
HIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROI N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTM		ARKED, AND LABELED AND IS IN PROP	ER CONDITION FOR TRANSPORTATION.
DATE: 7/17/80	Genora Barbo (Authorized Signature)	while in	
WASTE HAULER*	•	3000 GALLO	NS (Circle One)
METHOD OF SHIPMENT (Circle One) DRUMS			
	TANK TRUCK OPEN TRUCK		•
I HEREBY CERTIFY THAT THE REDVE DESCRIBED SPECIAL WASTE AN	ND QUANTITY HAS BEEN ACCEPTED IN PROPE	R CONDITION FOR TRANSPORT AND	ACKNOWLEDGE THE DESTINATION AS
1) (Adhorized Sknature)			DATE: 7_1 17 80
(Authorized Signature)			DATE://
JÍSPOSAL, STORAGE, OR TREATMENT FACILITY*			
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The state of the s			DATE: 1 11 80
(Authorized Schools A)	<b>∠</b>	•	DATE: 65
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COMMENTS OR SPECIAL INSTRUCTIONS:			
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NULLINGIS, 217 / 792 2627	4 HOUR EMERGENCY AND SPILL ASSISTANC	CE NUMBERS"	OUTSIDE ILLINOIS. 800 / 424-389
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR PART 2 I			6 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR	STATE OF ILLINOIS	0101375
WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGEN	
	DIVISION OF LAND POLLUTION CONTE SPECIAL WASTE HAULING MANIFES	997101
Manager at a control of	WASTE GENERATOR	Authorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St.	201055000
(Company Name) <b>Kankakee</b>	Address IL 60901	0 9 1 0 5 5 0 0 0 8 G
City	State Zip	
:	WASTE HAULER(S)	
Kankakee Industrial Dispos	sal 1360 E. Locust	S.W.H. Registration Number 0066
Hauler Name K	Hauler Address	25
Hafuler Name	Hauler Address	S.W.H. Registration Number 32 3
	DESTINATION — DISPOSAL STORAGE OR TREATMENT S	SITE
American Chemical Service	Colfax Ave. & C&O R.R.	91808902
(Facility Name)	Address	39 Site Number
Griffith	IN State Zip	
BE COMPLETED BY		
ASTE GENERATOR		
WASTE NAME: Acetone	a Contaminates	WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
IE SPECIAL WASTE BEING TRANSPORTED LINDER THIS MAN	VIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMED	NATELY RELOW
SHIPPING DESCRIPTION:		HAZARD CLASS:
en de la companya de La companya de la co		<u> </u>
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HIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WA I ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TO		AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INF		
al la-	Jenns Bare	, /
DATE: 1/32/80	(Authorized Signature)	
ASTE HAULER*	~	GALLONS (Circle One)
<del></del>	QUANTITY OF WASTE RECEIVED: 4,5 0.0	2 LU. TUS. 1
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OPEN TRUCK	OTHER(Specify)
HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIA	L WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CON	IDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
OICATED:		
Ceaux Fre		DATE: 7 / 22/ 43
(Authorized Senature)	•	
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ISPOSAL, STORAGE, OR TREATMENT FACILITY*		
IEREBY CERTIFY THAT THE BOYE DESCRIBED SECIAL W	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	
To Helil to	<u></u>	DATE:
(Authorized Signatur	-	80 85
OMMENTS OR SPECIAL INSTRUCTIONS		
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	~24 HOUR EMERGENCY AND SPILL ASSISTANCE NUM	18ERS
I ILLINOIS: 217 / 782-3637		
DISTRIBUTION: PART 1 GENERATOR	PART 2 IEPA PART 3 SITE PART 4 HAULER	PART - 5 IEPA PART - 6 GENERATOR

#### STATE OF ILLINOIS

<u>0101376</u>

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

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•	SPECIAL WASTE HAULIN WASTE GENERATI		Authorization I	tumber 997101
Miles Laboratories	195 W. Birc	h St.	' . '	
(Company Name)  Kankakee	Address <b>IL</b>	60901	091	0 5 5 0 0 0 8 Generator Number
City	State	Zip		
	WASTE HAULER(S	()	M,	
Kankakee Industrial Disposal	1360 E. Locust	$\lambda$	W.H. Registration Numb	er 0066 <i>010</i>
Hauler Name	Hauler Address	1/20		25
		40/	S.W.H. Registration Num	ber
- A third plants Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORAGE	OD TREATMENT SITE		32
merican Chemical Service				91808902
(Facility Name)  Griffith	Address	46319		39 Site Number
Attended the their City attended to the contract of		guardos Zip otronados		
) BE COMPLETED BY ASTE GENERATOR				
WASTE NAME: Acetone &	Contaminates	W	ASTE PHASE:	_Liquid
				(Liquid, Gaseous, Solid)
				1
EREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATIO	Colemona &	Jarbers		
DATE:	(Authorized Signatu	re)		
ASTE HAVLER*	QUANTITY OF WASTE RECEIVED: _	3000	2 CU. YOS.	(Circle One)
1		47 52	_	53
METHOD OF SHIPMENT (Circle One) / DRUMS	TANK TRUCK OP	EN TRUCK OTHE	R(Specif	)
HEREBY CERTIFY THAY THE ABOVE DESCRIBED SPECIAL WASTE	AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FO	R TRANSPORT AND I ACK	NOWLEDGE THE DESTINATION A
This Marker			ſ	DATE: 21 21 80
(Authorized Signature)	_			
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SPOSAL STORAGE, OR TREATMENT FACILITY"			<del></del>	
EREBY CERTIFY THAT THE ABOVE PESCRIBED SPECIAL WASTE AN	D INDICATED QUANTITY HAS BEEN ACCE	PTED:		
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(Author de Signature)	<del></del>			60 6
OMMENTS OR SPECIAL INSTRUCTIONS:	· · · · · · · · · · · · · · · · · · ·			
	<del></del>		<del></del>	
ILLINOIS: 217 / 782 3637	*24 HOUR EMERGENCY AND SPILL A	SSISTANCE NUMBERS*		OUTSIDE ILLINOIS 800 / 424-88
DISTRIBUTION: PART I GENERATOR PART 2	PART - 3 SITE P	ARI 4 HAULER PARI	5 IEPA PART 6 GE	

TO RECOMPLETED BY		0104077
TO PECOMPLETED BY WASTE GENERATOR	STATE OF ILLINOIS	$\sim \frac{U \perp U \perp 3 \perp 1}{2}$
\$	ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL	' \alpha \tag{7}
· •	SPECIAL WASTE HAULING MANIFEST	
A Control of the Cont	WASTE GENERATOR \	Authorization Number 997101
Miles Laboratories	195 W. Birch St.	
(Company Name)	Address	0.910550008 6
Kankakee	<u>IL 60901</u>	Generator Number 24
City	. State Zip	· · · · · · · · · · · · · · · · · · ·
	WASTE HAULER(S)	
(1) Kankakee Industrial Dispos	1300 5	i.W.H. Registration Number0_0_6_6_0
Hauler Name	Hauler Address	.25 31
(2) 4 (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		S.W.H. Registration Number
Softmany State Hauler Name 169 169 Section 1892	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	38
	DESTINATION - DISCORDE ON TREATMENT STE	
American Chemical Service	Colfax Ave. 3 C&O R. Rt	9190000
(Facility Name)	Address	39 Site Number 46
Griffith	IN 46319	
to our design and by a City of the superfunction of	APPA では、State where was APPA - APP Zip to about	
TO BE COMPLETED BY WASTE GENERATOR		
WASTE NAME: Acetone	& Contaminates WA	Tr pulser.
HASTE WANTE	The state of the s	STE PHASE:(Liquid, Gaseous, Solid)
7. 7.		
•	IFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELI	•
SHIPPING DESCRIPTION:		HAZARD CLASS:
<del> </del>		<del></del>
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THIS IS TO CEPTIFY THAT THE AROVE NAMED SPECIAL WAS	TE IS PROPERLY CLASSIFIED, DESCRIBED, <u>PACK</u> AGED, MARKED, AND LABELI	D AND IS IN BEARER COMMITTION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	E DEPARTMENT OF TRANSPORTATION.	D AND IS IN PROPER CONDITION FOR TRANSPORTATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	RMATION /	•
_/ _/-	Common Darley	
DATE: 1/28/80	(Authorized Signature)	
		T GALLONS (Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: 3 000	2 60. 103:
	47 52	53
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OPEN TRUCK OTHER	(Specify)
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:	The state of the s	-
· Dom	$\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j$	DATE: 7/ 38/ 50
(1) (Authorized Signature)		DATE: 7/ 3 8/ 59
(2)		DATE//
(Authorized Signature)		and the second s
DISPOSAL, STORAGE, OR TREATMENT FACILITYS		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ISTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	
10 . 0-	· ·	our 7/06/02
To Manufact HALLA	<del></del>	DATE: _7/28/ 80
<i>V</i>		
COMMENTS OR SPECIAL INSTRUCTIONS:		
· · · · · · · · · · · · · · · · · · ·		
	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*	OUTSIDE ILL/NOIS: 800 / 424-8802

TO BE COMPLETED BY	STATE OF ILLINOIS	0101378
WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	SPECIAL WASTE HAULING MANIFEST	Authorization Number 997101
Miles Laboratories	WASTE GENERATOR  195 W. Birch St.	Authorization Number 397101
(Company Name)	Address	0910550008
Kankakee City	IL 60901 V	Generator Number 24
	WASTE HAULER(S)	
(I) Kankakee Industrial Disp	003 TOO P 1	212
(1) Hauler Name	OSal 1360 E.* Locust  Hauler Address	S.W.H. Registration Number 0 6 6 6 7 31
(2) Hauler Name	Hauler Address	S.W.H. Registration Number
	DESTINATION - DISPOSAL'STORAGE OR TREATMENT SITE	
American Chemical Service	Colfax Ave. \$ CAO R. R. Address	9 1 8 0 8 9 0 2
Griffith	IN 46319	
TO BE COMPLETED BY	Sec Mill Paper (1944 State ) pro 音楽を表す。 2 May 2 a co Zip - Sec Se 表記を表記されていた。 2007年 日本の (1944 日本の 1945 日本の 19	e de la mala de la 180 de maior de la 180 de la mala de La mala de la mala de l
WASTE GENERATOR		
WASTE NAME: ACE to	one & Contaminates	WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
		(Liquid, daseous, Solid)
	<b>6</b>	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS M SHIPPING DESCRIPTION:	MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY (	BELOW: HAZARD CLASS:
•		
INIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL V IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF	WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LAG F THE DEPARTMENT OF TRANSPORTATION.	BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN IF	NFORMATION /	•
W. 7/30/80	Genora Barber	
DATE:	(Authorized Signature)	
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	GALLONS (Circle One)
	QUARTITION PASIE RESERVED 47 300 C	<del></del>
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OF	HER (Specify)
I HEREBY CERTHY THAT THE ABOVE DESCRIBED SPEC	CIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED: LU VIIII		7 30 00
(1) (Authorized Signature)	<del></del>	DATE: 1 30, 80
(2)		DATE:///
(Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		•
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL	L WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	2 (0
- Authorities	20-	$\int_{\text{DATE:}} \frac{2C}{2} \frac{80}{2}$
(Authorized September 2)		
COMMENTS OR SPECIAL INSTRUCTIONS:		
IN ILLINOIS: 217 / 782-3637	-74 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS"	OUTSIDE ILLINOIS. 800 / 424-8802
DISTRIBUTION. PART 1 GENERATOR	PART 2 IEPA PART: 3 SITE PART 4 HAULER PAR	T - 5 IEPA PART - 6 GENERATOR

Y - PART 3

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STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

	WASTE GENERATOR	ANIFEST	Authorization N	tumber $\frac{99710}{13}$
Miles Laboratories	195 W. Rirch St.	, <del></del>		
(Company Name) <b>Kankakee</b>	Address <b>IL</b>	60901	14 0 9	1 0 5 5 0 0 0 8 G Generator Number 24
c City	State	Zip	<del></del>	····-
	WASTE HAULER(S)		•	
(1) Kankakee Industrial Disposal		<u> </u>	S.W.H. Registration Numb	er <u>0066010</u>
Hauler Name	Haufer Address 4			25
(2)			S.W.H. Registration Num	ber
Hauler Name (1977)	Hauler Address  DESTINATION — DISPOSAL STORAGE OR TI	REATMENT SITE	e de la companya de l	32
			∠, γ	1
American Chemical Service (Facility Name)	Colfax Ave. & CAO R	R.	$(\mathcal{A}_{\mathcal{A}})$	9 1 8 0 8 9 0 3 3 5 5 5 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Griffith	하시아 사용과 아이들은 게 되어 되었다면 하는 그는 모든 이 것 같습니다.	46319		
TO BE COMPLETED BY ASSESSMENT OF THE CONTROL OF THE	State Many State	.e. <sub>e</sub> ⇔ Zip \	-00/-	
WASTE GENERATOR		$\searrow$	0/	
WASTE NAME: Acetone	& Contaminates	$\sim$	WASTE PHASE:	Liquid (Liquid Gaseous, Solid)
na Artinia de Carlos de Carlos Carlos de Carlos de				(2140.0)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIF	T T IS OF THE DOT HAZARD CLASSIFICATION INDICA	ITEN IMMENIATERY (	acinw.	•
SHIPPING DESCRIPTION:	EST TO ST THE BOTT HAZING SENSON TORTHON HAZING	ייובט ואווווינטואוכנו ו	HAZARD CLASS:	
	<u> </u>			<u> </u>
	•			
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTI IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR	MATION JEMBER Barbe	D, MARKED, AND LAI	BELED AND IS IN PROPER CI	ONDITION FOR TRANSPORTATION, .
DATE: 1710	(Authorized Signature)			
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	200	T GALLONS 2 CU: YUS:	(Circle One)
	47			33
	RUMS (TANK TRUCK) OPEN TR		HER(Specif	•
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL VINDICATED:	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PI	ROPER CONDITION	FOR TRANSPORT AND 1 ACK	NOWLEDGE THE DESTINATION AS
0 19 (FID)			1	DATE:
(Authorized Signature)	<del></del>			
(2) (Authorized Signature)			C	DATE://
DISPOSAL, STORAGE, OR TREATMENT FACILITY				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND INDICATED QUANTITY HAS BEEN ACCEPTED:			
			. (	DATE:
- Filmgo			<u> </u>	<del>\$ 4 80</del>
S OR SPECIAL INSTRUCTIONS			-	
	<del></del>	<del> </del>		
3637	~24 HOUR EMERGENCY AND SPILL ASSIST	ANCE NUMBERS		OUTSIDE ILLINOIS 800 / 424-880

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STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL

SPECIAL WASTE FAULTING MANIFEST

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Authoptation Number		<u> </u>		_		. 📤
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	WASTE GENERAT		Authorization Number 3 13
Miles Laboratories	195 W. Bi	rch St.	
(Company Name)	Address		<b>0910550008</b> G
Kankakee	IL 🔫	60901	14 Generator Number 24
City	State	Zip	
* **	WASTE HAULER(S	5)	
i) Kankakee Industrial Disposal	1360 E. Löcust	S.W.H. F	Registration Number 0066010
Hauler Name	Hauler Address		25
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2)	學 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	S.W.H.	Registration Number
Hauler Name	Hauler Address		32
	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE	
American Chemical Service	Colfax Ave.	a Cau R.R.	<u>91808902</u>
(Facility Name)	Address		Site Number
Griffith	IN State	46319	
O BE COMPLETED BY	gram date of the state of the state of	Silver State Cip reproductive in the con-	
VASTE GENERATOR			
	Contaminates		
WASTE NAME: ACETONE &	Containmates	WASTE PH	ASE: Liquid (Liquid, Gaseous, Solid)
			(240.0, 0330014, 55.10)
- No		A STATE OF THE STA	
HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS	OF THE DOT HAZARD CLASSIFICATION	INDICATED IMMEDIATELY BELOW:	
SHIPPING DESCRIPTION:	•		ARD CLASS:
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	<u>−</u>		***
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HIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PI N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPAI	ROPERLY CLASSIFIED, DESCRIBED, PAC DIMENT OF TRANSPORTATION	KAGED, MARKED, AND LABELED AND	IS IN PROPER CONDITION FOR TRANSPORTATION.
A ACCOMPANCE WITH THE ACT COUNCE NECOCETIONS OF THE CELLAI	THERT OF MANS ON ATOM.		
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATIO	N	2 5	
allon	Jenora D	arter	
DATE: OF 6/00	(Authorized Signati	nte) - 7	
WAATE WALLED			T GALLONS (Circle One) >
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: _	300_	2 CU YOS
		47 - 7 52	32
METHOD OF SHIPMENT (Circle One) / DRUMS	TANK TRUCK OP	EN TRUCK OTHER	(Specify)
		,	·
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE NO ICATED:	AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FOR TRANS	PORT AND I ACKNOWLEDGE THE DESTINATION AS
The state of the s		•	£ , &
1) Abut VIII	· <del></del>	:	DATE: A_/ A_/ AC
(Authorized Signatur)			, D C 3
2) /	_	•	DATE:///
/ (Authorized Signature)			<u> </u>
DISPOSAL, STORAGE, OR TREATMENT FACILITY	2. <b>₹*</b> <b>∱</b> 23	•	
THE ADOLE OF COURT CONTROL WASTE AND	•	70.00	
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND	JUDA MASS CAN THI MADY DEFN ACCE	FILU.	1 Et 60
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(Authorize) Schall (Authorize)			60 63
CONTRACTOR OF COLON INCIDENCE TONG	•		
COMMENTS OR SPECIAL INSTRUCTIONS:			
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		LOCIOTAMOS MULASSOS -	
N ILLINOIS. 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL	ASSISTANCE NUMBERS	OUTSIDE ILLINOIS: 800 / 424 330

TO BE COMPLETED BY WASTE GENERATOR	STATE OF ILLIN ENVIRONMENTAL PROTEC DIVISION OF LAND POLLUT SPECIAL WASTE HAULIN WASTE GENERATO	TION AGENCY ION CONTROL G MANIFEST	0131454 Authorization Number 997101
Miles Laboratories	195 W. Birch	st.	
(Company Name)  Kankakee  City	Address  IL  State	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
	WASTE HAULER(S)		1
(1) Kankakee Industrial Disposal		· · · · · · · · · · · · · · · · · · ·	S.W.H. Registration Number 0 0 6 6 0 1 0
Hauler Name	Hauler Address		25 31
Hauler Name	Hauler Address		S.W.H. Registration Number 32 38
Apperican Chemical Service (Facility Name)	DESTINATION — DISPOSAL STORAGE (  Colfax Ave. 8 C. 8  Address	O R.R.	91808902 " Site Number "
Griffith Chy	State	46319 Zio	
TO BE COMPLETED BY WASTE GENERATOR	State Communication of the Com	2 Lip	
WASTE NAME: Acetone	& Contaminates	W	STE PHASE: Liquid (Liquid, Gaseous, Solid)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAL TO ALL.	DEPARTMENT OF TRANSPORTATION.  MATION ATTOMATION OF TRANSPORTATION.	alex	ED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	3000	GALLONS (Circle One)
METHOD OF SHIPMENT (Circle One) DR	UMS TANK TRUCK OPE	N TRUCK OTHE	53 R (Specify)
$\sim$ 11			R TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) (Autholized Signature)	<del></del>		DATE: 4 /2 / 80 <sub>59</sub>
(Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY*	·····		DATE://
I HEREBY CERTIFY THAT THE ADOVE OF STRIBED SPECIAL WAST	E AND INDICATED QUANTITY HAS BEEN ACCEP	TED:	DATE:// 65
COMMENTS OR SPECIAL INSTRUCTIONS.			8 17 B
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 CENERATOR PA	*24 HOUR EMERGENCY AND SPILL AS RT - 2 TEPA PART - 3 SITE PA	SISTANCE NUMBERS TRIES A HAULER PART	OUTSIDE ILLINOIS: 800 / 424 8802 5 IEPA PART - 6 GENERATOR

<u>0131455</u>

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY

	SPECIAL WASTE HAULING	MANIFEST	Authorization Numb	er <u>997101</u>
Miles Laboratories	waste generator  195 W. Birc	•	_ 1	8 13
(Company Name)	Address	11 36.	W 0910	5 5 0 0 0 8 G
Kankakee	State	60901	Ger	nerator Number 24
City	WASTE HAULER(S)	214	<del>\</del>	
(1) Kankakee Industrial Disposal	1200 5			
(1) Hauler Name	1360 E. Locust S	X	S.W.H. Registration Number _	_0066010
		$\beta$ .		
(2) Hauler Name	Hauler Address		S.W.H. Registration Number _	32 38
Single State of the Control of the C	DESTINATION — DISPOSAL STORAGE OF	R TREATMENT SITE		
Amandan Chamlas I Sandas				
American Chemical Service (Facility Name)	Colfax Ave. & C	<u> </u>	39	1 8 0 8 9 0 2 Site Number 6 2 44
Griffith	IN	46319		
TO BE COMPLETED BY	State	* and e.Zip — state. State and the state of the state.		a da Para da Artiferia de Proposicio de Proposicio de Proposicio de Proposicio de Proposicio de Proposicio de Proposicio de Proposicio d
WASTE GENERATOR				
WASTE NAME: Acetone &	<u>Contaminates</u>	1	VASTE PHASE:(Liqu	Liguid id Gaseous Solid)
	···			
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION IND	י R Y CATED IMMEDIATELY R	FI NW:	
SHIPPING DESCRIPTION: -		\_	HAZARD CLASS:	
	<del></del>	·		<del></del>
		,		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE I	 S PROPERLY CLASSIFIED, DESCRIBED, PACKAC	— GED, MARKED, AND LABI	ELED AND IS IN PROPER CONDI	TION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	. <u>1</u> .2		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	ATION			
DATE: 8/14/80	(Authorized Signature	KINCKI		
WASTE HAULER®		. 4	CT GALLONS (C	rcle One)
	QUANTITY OF WASTE RECEIVED: 47	<u> </u>	<del>2 60 408.</del>	53
METHOD OF SHIPMENT (Circle One) DRU	MS TANK TRUCK OPEN	TRUCK OTH	IER(Specify)	
I HEREBY CERTIFY THAT THE ANOVE DESCRIBED SPECIAL WA	STE AND QUANTITY HAS BEEN ACCEPTED IN	PROPER CONDITION F		LEDGE THE DESTINATION AS
MOTCATED:				# 12
(1) Listatiborized Signature)	<del></del> ,	, ,	DATE.	8-1,241,80,
(2) Kul Sarollon 18	<b>∕</b> /∑	,	DATE	8,14,80
/ (Authorized Sighalund)		`		
DISROSAL STORAGE, OR TREATMENT FACILITY*				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPT	ED:	C	2 14 50
(Authorized Signature)			DATE.	
			•	
COMMENTS OR SPECIAL INSTRUCTIONS:		<u> </u>		

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TO BE COMPLETED BY WASTE GENERATOR	SI ATS OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY	<u>0131456</u> .
	DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST	997101
Miles Laboratories	waste generator  195 WasBirch St.	Authorization Number 8
(Company Name)  Kankakee	IL 60901	0 9 1 0 5 5 0 0 0 8 G Generator Number
City	State Zip	M.
(I) Kankakee Industrial Disposal	1360 E. Clocust	S.W.H. Registration Number 0066010
Hauler Name	Hand Adjoess Co	75
Haûler Name (1992)	Castal Hauter Appress	S.W.H. Registration Number 2, 33 38
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
American Chemical Service	Colfax Ave. & C & O R.R.	91808902
GPIFFILD	1H 46319	
TO BE COMPLETED BY	Service Control of the Control of th	
WASTE GENERATOR WASTE NAME Acetone &	Contaminates	WASTE PHASE: Liquid
	F- 6 3/4	(Liquid, Gaseous, Solid)
	IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATI	ELY BELOW:
SHIPPING DESCRIPTION:		HAZARD CLASS:
<u> </u>		
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEF	PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND PARTMENT OF TRANSPORTATION.	LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION O	
DATE: 8/18/80	(Authorized Arghature)	
WASTE HAULER	QUANTITY OF WASTE BECEIVER _1_3 0C	Circle One)
METHOD OF SHIPMENT (Circle One) DRUM		OTHER(Specify)
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS		ON FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
KINS IN	of the second	0 - 1 - 10

WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED

₹4 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS®

IN ILLINOIS. 217 / 782-3637

DISTRIBUTION PART 1 GENERATOR

SITE COPY - PART 3

PART 6 GENERATOR

# TO BE COMPLETED BY

### STATE OF ILLINOIS

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WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY	~ N	7-2-3-5
	DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	00740
	WASTE GENERATOR	Authorization Num	ber 9 7 1 0 1
Miles Laboratories (Company Name)	195 W. Birch St.		
Kankakee	Address 60901		5 5 0 0 0 8 G enerator Number 24
City	Slate Zip	Ho,	
	WASTE HAULER(S)	,	· · · · · · · · · · · · · · · · · · ·
(1) Kankakee Industrial Disposal	1360 E. Locust	S.W.H. Registration Number	0066010
Hauter Name	Hauler Address -	5.W.H. Registration Number	23 0 6 6 0 1 0
(2) Hauler Name	Hauler Address	S.W.H. Registration Number	32 38
<b>建设设施设施设施设施设施</b>	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	State of the state of	
American Chemical Service	Colfax Ave. & C & O R R	39	9 1 8 0 8 9 0 2
Griffith	IN 46319		
TO BE COMPLETED BY	State and State and Security of the Company of Zip Secu		
WASTE GENERATOR			
WASTE NAME: Acetone &	Contaminates	WASTE PHASE:	_Licuid
		(Lic	uid, Gasedus, Solid)
		· · · · · ·	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST I	S OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIAT	<del></del>	
SHIPPING DESCRIPTION:	·	HAZARD CLASS:	
· · · · · · · · · · · · · · · · · · ·	<del>-</del>	<del></del>	<del></del>
	<u> </u>		
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS		TABELED AND IS IN PROPER COND	ITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPA			
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	Chenora Barber		
DATE: 8/20/80	(Authorized Signature)		•
	· · · · · · · · · · · · · · · · · · ·	T GALLONS (	Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	2 - EU-YO3	1
	*	32	ے: `
METHOD OF SHIPMENT (Circle One) DRUMS		OTHER(Specify)	
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE	E AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITI	ION FOR TRANSPORT AND I ACKNO	WLEDGE THE DESTINATION AS
A BA	• •		101710
(Authorized Signature)	-		198120180
(2)	_	DATE	//
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AN	ID INDICATED QUANTITY HAS BEEN ACCEPTED:		•
- TRANS	<del>)</del>	DATE	-7/-70-40
(Authorized Signature)	Art Contraction		- Jan
COMMENTS OR SPECIAL INSTRUCTIONS:	<del></del>	<del></del>	
IN HUNDIS: 217 / 792 3637	24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER	RS° n	UTSIDE ILLINOIS: 800 / 424-8802
IN ILLINOIS: 217 / 782-3637	1 ICOA DAGE 2 CITE DADE A MAINES	-	0.000 rechiolo. 000 / 424-0002

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TO BE COMPLETED BY	STATE OF ILLINOIS	$\lim_{n \to \infty} \int_{\mathbb{R}^n} \int_{\mathbb{R}^n} \int_{\mathbb{R}^n} \frac{013145}{n} dn$
NASTE GENERATOR	ENVIRONMENTAL PROTECTION AGEN	ACY CALLY
	DIVISION OF LAND POLLUTION CONTI	ROT INV
•	SPECIAL WASTE HAULING MANIFES WASTE GENERATOR	Mulhorization Number 997101
	•	
Miles Laboratories (Company Name)	195 W. Birch St. Address	0010550000
Kankakee	IL 60901	1 0 9 1 0 5 5 0 0 8 Generator Number
City	State Zip	
No. No. of the Control of the Contro	WASTE HAULER(S)	
Kankakee Industrial Disposal	1250 5 1 2200 1	
Hauler Name	1360 F. Locust Hauler Address	S.W.H. Registration Number 006601
		S.W.H. Registration Number
Hauler Name	Hauler Address DESTINATION — DISPOSAL STORAGE OR TREATMENT S	and the same of th
	DESTINATION — DISTUSAL STORAGE OR TREATMENTS	
merican Chemical Service	Colfax Ave. & C & O R.R.	019000
(Facility Name)	Address	39 Site Number
Griffith	IN 46319	
SECOMPLETED BY ASSESSED TO SECURE ASSESSED.	- procedure State of the procedure of the control of the Zip	
STE GENERATOR		
WASTE NAME: Acetone &	Contaminates	WASTE PHASE:
	-CONCORTING CCS	(Liquid, Gaseous, Solid)
SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMED	DIATELY BELOW:
IS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS	PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED,	AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEF		
EREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION	
0/1/100	Channa Barbe	* .
DATE: 8/26/80	(Authorized Signature)	
ASTE HAULER*		GALLONS (Circle One)
<del></del> _	QUANTITY OF WASTE RECEIVED:	2 C C C C C C C C C C C C C C C C C C C
METHOD OF SHIPMENT (Circle One) DRUM	IS TANK TRUCK OPEN TRUCK	OTHER (Specify)
		, ,,
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS DICATED:	IE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CON	IDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION A
HI OF BEE		
(Authorized Signature)	<del></del>	DATE 28/ 22/ 86
(Wittinissen 218 June)		DATE:///
(Authorized Signature)	<u> </u>	DATE://
SPOSAL, STORAGE, OR TREATMENT FACILITY*	•	
PREDV CENTIEV THAT THE ADOVE DECODIDED COECIAL MACTE A	NO INDICATED CHANTITY HAS DEEN ACCEPTED.	
EREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	IND INDICATED QUANTITY HAS BEEN ACCEPTED:	
- 100 m - 100	IND INDICATED QUANTITY HAS BEEN ACCEPTED:	DATE
EREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	IND INDICATED QUANTITY HAS BEEN ACCEPTED:	DATE.
(Authorized Signature)	IND INDICATED QUANTITY HAS BEEN ACCEPTED:	DATE.
(Authorized Signature)	IND INDICATED QUANTITY HAS BEEN ACCEPTED:	DATE.
(Authorized Signature)		
OMMENTS OR SPECIAL INSTRUCTIONS:  N ILLINOIS: 217 / 782-3637	AND INDICATED QUANTITY HAS BEEN ACCEPTED:	

		. ****	
TO BE COMPLETED BY	STATE OF ILLIN	Oic .	0131450
WASTE GENERATOR		013	Q131459
	ENVIRONMENTAL PROTECT DIVISION OF LAND POLLUTI	ON CONTROL 1/2/	<i>K</i> ,
	SPECIAL WASTE HAULING		007101
	WASTE GENERATOR	Au	thorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St	$\sim$	
(Company Name)	Address	<del></del>	0910550008
Kankakee	IL	60901	0 9 1 0 5 5 0 0 0 8 G
→ City	State	Zip	
的特殊的 (1974年) 1974年(1976年) (1976年)	WASTE HAULER(S)		
Yankakan Industrial Dianasa	1250 F 1		Salah Sa
*(I) Kankakee Industrial Disposa		S.W.H. Regist	ration Number 0 0 6 6 0 1 0
Hauler Name	-Hauler-Address		25
Hauler Name	Hauler Address	S.W.H. Regis	tration Number
The second secon	DESTINATION - DISPOSAL STORAGE OF	R TREATMENT SITE	<u>la francia de la francia de</u>
American Chemical Service	Colfax Ave. & C & O	R.R.	91808902
(Facility Name)	Address		9 1 8 0 8 9 0 2 39 Site Number 44
Griffith	IN	46319	
的数据的数据的数据,可以City 经现金数据证据多点的证据。	State State	Land to Zip at the second state of the	
TO BE COMPLETED BY WASTE GENERATOR		The state of the s	
THE CHARLEST TO SEE THE SECOND SECOND			
WASTE NAME: Aceton	e & Contaminates	WASTE PHASE:	(Liquid, Gaseous, Solid)
			,
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIF	EST IS OF THE DOT HAZARD CLASSIFICATION IND	ICATED IMMEDIATELY BELOW:	•
SHIPPING DESCRIPTION:		HAZARD (	LASS:
			-
<u> </u>			<u> </u>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WAST	E IS PROPERLY CLASSIFIED, DESCRIBED, PACKA	GED, MARKED, AND LABELED AND IS IN	PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE	DEPARTMENT OF TRANSPORTATION. 11 191		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR	MATION	•	
0/-1-	( bear as a St	Alrek	,
DATE: 8/28/80	(Authorized Signature	<i>  B. J. K. K. J</i> } :	
			CALLUNS (Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVED:	3000	CIT ADE:
	47	52	<del>- 5</del> 3
METHOD OF SHIPMENT (Circle One) D	RUMS TANK TRUCK OPEN	TRUCK OTHER	(Specify)
. /)		•	
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL TINDICATED:	WASTE AND QUANTITY HAS BEEN ACCEPTED IN	PROPER: CONDITION FOR TRANSPORT	AND I ACKNOWLEDGE THE DESTINATION AS
Allyn M			0 00 00
(1) / WI / Wes			DATE: 2 281 80
(Authorized Signature)	;		, 54 . 59
(2)(Authorized Separture)	<del></del>		DATE://
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY			
I HEREBY CERTIFY THAT THE ARD E-DESCRIBED SPECIAL WAS	STE AND INDICATED QUANTITY HAS BEEN ACCEPT	ED:	_
- 11	0	. •	D . n. d. 125
(Au) do antiro (Au)		£	DATE &_/ 2&/ &#</td></tr><tr><td>(variations)</td><td></td><td></td><td>••</td></tr><tr><td>COMMENTS OR SPECIAL INSTRUCTIONS:</td><td></td><td></td><td></td></tr><tr><td>¥</td><td></td><td></td><td></td></tr></tbody></table>

724 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS?
IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA

OUTSIDE ILLINOIS: 800 / 424 8802 PART 6 GENERATOR

TO BE COMPLETED BY	STATE OF ILLINOIS	0131460
WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL	( , , , , , , , , , , , , , , , , , , ,
en e	SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR	Juthorization Number - 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St.	
(Company Name)  Kankakee	Address 60901	0 9 1 0 5 5 0 0 0 8 G Generator Number
City	State Zip  WASTE HAULER(S)	1
(1) Kankakee Industrial Disposa Hauler Name	1 1360 E. Locust  Hauler Address	S.W.H. Registration Number 0 0 6 6 0 1 0
DY STATE OF THE PROPERTY OF TH		
Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	S.W.H. Registration Number
American Chemical Service	Colfax Ave. & C & O R.R.	91808902
6riffith	IN 46319	lander film de fel fra film film a fra film film fra f
TO BE COMPLETED BY	Slate Zip	
WASTE GENERATOR  WASTE NAME: Acetone	8 Contaminates	WASTE PHASE: I fould
MASIE NAME. ACECOME	a tantaminaces	WASTE PHASE: Liquid, Gaseous, Solid)
	<u> </u>	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANI SHIPPING DESCRIPTION:	IFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	BELOW: HAZARD CLASS:
· · · · · · · · · · · · · · · · · · ·		
·		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WAS	TE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND U	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO		
a lala	Characa Barber	
DATE: 7/4/80	(Authorized Signature)	
WASTE HAULER*	QUANTITY OF WASTE RECEIVED: 3 000	(Circle One)
METHOD OF SHIPMENT (Circle One)	DRUMS TANKTRUCK OPEN TRUCK C	52 3,000 33 OTHER (Specify)
	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	
INDICATED:		TO A TANK OF THE OCCUPANT OF T
(1) Authorized Signature)	<del>}_</del>	DATE: 7-1 2-1 80
(2)	<u>U</u>	DATE://
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ISTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	
(Authorized Signature)		DATE: 2 /
COMMENTS OR SPECIAL INSTRUCTIONS:		
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR	PART · 2 IEPA PART · 3 SITE PART · 4 HAULER PA	OUTSIDE ILLINOIS: 800 / 424-8802  RT - 5 IEPA PART - 6 GENERATOR
DISTRIBUTION. FART I GENERATOR	THE CALL THE PARTY OF THE PARTY	A VIEW TIME & GENERATOR

<u>0137405</u>

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY

	DIVISION OF LAND POL SPECIAL WASTE HAU WASTE GENE	ILING MANIFEST	Authorization N	umber 997101
Miles Laboratories	195 W. Birch	St.		
(Company Name)	Address	<del></del> -	0910	5 5 0 0 0 8 6 Generator Number 24
Kankakee City	IL State	60901	14 - 5	Generator Number 24
City	WASTE HAULI	Zip	<del></del>	
	HASIC HAULI	LN(3)		
(1) Kankakee Industrial Dispos	al 1360 E. Locust		S.W.H. Registration Number	0066010
Hauler Name	Hauler Address	المستوارة والإراث أدراه سراسيه	er de la comp	الا الله المنافعة الم
MBB LEIDE STEINE MET MEN DE LES SES. Divini de la companya de la company				
(2) Hauler Name	Hauler Address		S.W.H. Registration Numb	er
Maka desperanta de la companya del companya del companya de la com	DESTINATION — DISPOSAL STOR	RAGE OR TREATMENT SITE		
American Chemical Service	Colfax Ave. & C &	O R.R.		1808902
(Facility Name)	Address			Site Number
Griffith City	Indiana State	46319		
TO BE COMPLETED BY TWO AS A STATE OF THE STA	a productive substitutive substitution in the substitution of the	terge vita se ja <b>cip</b> i angelija a Later viti ostate 7. adetaka i	ingi Papagangang Sundigi. Sundi Bumi pang Anggan	in kan mengupat kansa dan sasah dalah dala
WASTE GENERATOR				
WASTE NAME: Aceton	e and Contaminates		WASTE PHASE:	land
				Liquid, Gaseous, Solid)
	<u> </u>		والإسرار وعاده الميهيمينين والالتحاضات المراجي	
		<u> </u>		
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WAS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	STE IS PROPERLY CLASSIFIED, DESCRIBED, HE DEPARTMENT OF TRANSPORTATION.	PACKAGED, MARKED, AND LAB	ELED AND IS IN PROPER CO	NDITION FOR TRANSPORTATION,
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	ORMATION			
	0 4 4 6	a la la		
DATE: 1/4/80	(Authorized Sig	inature)		
		4	GALLONS	(Circle One)
WASTE HAULER*	QUANTITY OF WASTE RECEIVE		2 CU. 10'S.	
	<u>·</u>	" 2500"		53
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK	OPEN TRUCK OTH	IER(Specify	•
I HEREBY CERTIFY HAT THE ABOVE DESCRIBED SPECIAL	WASTE AND QUANTITY HAS BEEN ACCEP	TED IN PROPER CONDITION F	OR TRANSPORT AND 1 ACK	NOWLEDGE THE DESTINATION AS
INDICATED:				
10 Miller			.D	ATE: 0 1 / 0 4/ 3 0 59
(Authorized Signature)	三藝 化磺胺基甲酚基 经货货	*.**1		
(2)			· D	ATE://
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ASTE AND INDICATED QUANTITY HAS BEEN A	ACCEPTED:		
100 ( ( ( )			D	NE: _ L - K - F (
(the halforited lander	·		<u>-</u>	<del></del>
COMMENTS OF SPECIAL INSTRUCTIONS				
COMMENTS OR SPECIAL INSTRUCTIONS:				
COMMENTS OR SPECIAL INSTRUCTIONS:				

		04.05.40
TO BE COMPLETED BY	STATE OF ILLINOIS	<u> </u>
WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY	
	DIVISION OF LAND POLLUTION CONTROL	
	SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR	Authorization Number 997101
·	• \ \	8 13
<u> Miles Laboratories</u>	195 W. Birch St.	
(Company Name) <b>Kankakee</b>	Address	0910550008 6
City	State 60901	Generator Number 24
5.07	WASTE HAULER(S)	<del></del>
	Those indeed(5)	
(1) Kankakee Industrial Dispos	al 1360 E. Locust	S.W.H. Registration Number 0 0 6 6 0/0
Hauler Name	Hauler Address	25 21
(2)		S.W.H. Registration Number 32 38
Hauler Name	Hauler Address	132
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
American Chamical Service	Colfax Ave. & C&O R.R.	
(Facility-Name)	Address	9 1 8 0 8 9 0 2
Griffith	Indiana 46319	
Jean City The Name of the Control of	(大型 e ) (新聞) 、State (中) コールサイン (新聞) たいから Zip Tio (日)	
TO BE COMPLETED BY	世界教徒、民主党副院院院、张等福河、中海公司的共享国际宣传	JAN SE PERMATENATURA
WASTE GENERATOR		
WASTE NAME: Acetone	& Contaminates	WASTE PHASE: 1 fquid
		(Liquid, Gaseous, Solid)
- 17 (14)		
	VIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	
SHIPPING DESCRIPTION:		HAZARD CLASS:
<del> </del>		·
	<b>1</b>	
<del></del>	· ·	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WA: IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TI	STE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LAI HE DEPARTMENT OF TRANSPORTATION	BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, `
IN ACCOMMINE WITH THE ATTEMADE RESIDENTIANS OF TH	TO DEL ARTIMETT OF TRANSPORTATION.	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	ORMATION /	
17	SENOTAL DULLES	
DATE:1/16/80	(Authorized Signature)	<u> </u>
WASTE HAULER?	<b>.</b> .	T GALLONS (Circle One)
	- QUANTITY OF WASTE RECEIVED:	53
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OF OPEN TRUCK OF	HER(Specify)
	L WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED		17
(1) The Misting		DATE: 0 1/ 1 6 8 0
(Authorized Signature)		54 59
(2) //		DATE:///
/ (Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		
1 HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL W	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	
1 /h . I/		DATE: 1 17 20
(Authorized Steplatuse)	7	DAIE: 1 1 Co
	<del></del>	
COMMENTS OR SPECIAL TISTRUCTURE		
j.		
IN ILLINOIS: 217 / 782-3637	2: HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS?	OUTSIDE ILLINOIS: 800 / 424 8802
DISTRIBUTION: PART 1 GENERATOR	PART 2 IEPA PART 3 SITE PART 4 HAULER PAR	T - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

<u>0137407</u>,

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL

	SPECIAL WASTE HAULING MANIFESTI WASTE GENERATOR	Authorization Number 997101
Hiles Laboratories	195 W. Birch St.	a I
(Company Name)	Address	0910550008
Kankakee	IL60901	Generator Number
City	State Zip	
	WASTE HAULER(S)	
Kankakee Industrial Disposa	1 - 1360 F. Locust	S W.H. Registration Number 0 0 6 6 0 //
Hauler Name	Hauler Address	S.W.H. Registration Number 0 0 6 6 0 1
		S.W.H. Registration Number
Survey Stay Hauler Name Stay 1994 Annuary Land	Hauler Address	32 32
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
Imanican Chaminal Samulas	Colfee Number COO D. D.	
(Facility Name)	Colfax Ave. & C&O R.R.	9 1 8 0 8 9 0 2
Griffith	TN ACOLO	
Armed Tale 12th gard City and Tale 12th 1	IN 46319	
BE COMPLETED BY		CARROLL SANDELLES TELLES AUTOMOBILES AND
ASTE GENERATOR		
WASTE NAME: Acetone	& Contaminates	WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
	例如"天经"。1915年, <b>第</b> 二次的李勒拉。	(Liquid, Gaseous, Solid)
연속관계 : [14] [16] - [16] <u>- [16] - [16]</u>		
CONCOLLA MARTE DE MO YDANIONOMED UNOED TIMO ALAMIE	TOT IC OF THE DOT HAZING OF SOME	
SHIPPING DESCRIPTION:	EST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATE	
SHIPPING DESCRIPTION:		HAZARD CLASS: 1
	· .	•
	<u> </u>	<del></del>
IS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTI ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE	E IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND	LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
ACCORDANCE WITH THE AFFEICABLE REGULATIONS OF THE	DEFARIMENT OF TRANSFORTATION.	
IEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR		
1/22/40	Jenary Briber	
DATE: 1/2 3/80	(Authorized Signature)	•
ASTE HAULER*	-	(T)GALLONS (Circle One)
The state of the s	QUANTITY OF WASTE RECEIVED: 47 300	2 O Y CU. YOS
	47	52 53
METHOD OF SHIPMENT (Circle One)	RUMS TANK TRUCK OPEN TRUCK	OTHER(Specify)
HERERY CERTISY THAT THE AROVE DESCRIRED SPECIAL A	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	AN COR TRANSPORT AND I ACKNOWNSING THE DESTINATION A
DICATED	THE PARTY WAS BEEN ROLL TO IN THOSE R CONDING	THE FOR TRANSPORT AND TACKNOTICEDGE THE DESTINATION A
K. W. Malle		1.238
(Authorized Signature)	<del></del>	DATE:/
(Authorized digitatory)		
(Authorized Signature)	<del></del>	DATE://
SPOSAL STORAGE, OR TREATMENT FACILITY*		
SPUSAL, STURAGE, UN INCAIMENT PAULITY		
EREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	
		Dire / /
(Authorized Signature)	<del></del>	DATE://
// 0		····
MMENTS OR SPECIAL METRUCTIONS		
( 18/11/1/	·	
WHIM AND		
ILLINO18: 214 / 782-3637/	-24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER	S = OUTSIDE ILLINOIS: 800 / 424 8
	ART - 2 IEPA PART - 3 SITE PART - 4 HAULER P	ART - 5 IEPA PART - 6 GENERATOR

. A 1.44			The second second
TO BL COMPLETED BY WASTE GENERATOR	STATE OF ILLINOIS  ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL		<u>0137408</u>
	SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR	Authorization Num	per 9 7 1 0 1
Miles Laboratories	195 W. Birch St.		8 13
(Company Name)	Address v *	0910	50008 6
Kankakee	IL	14 : G	enerator Number 24
City	STATE Zip  WASTE HAULER(S)		
(1) Kankakee Industrial Disposa	1360 E. Locust		0055 010
Hauler Name	Hauler Address	S.W.H. Registration Number	00660/0
(2) Hauler Name	Hauler Address	. S.W.H. Registration Number	32 38
National National Control of the Con	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE		
American Chemical Service	Colfax Ave. & C&O R.R.		
(Facility Name)	Address Address	39	1 8 0 8 9 0 2
Grissith	Indiana 46319		
TO BE COMPLETED BY	State		
WASTE GENERATOR		1-1-1	
WASTE NAME: Acetor	ne & Contaminates	WASTE PHASE:	Liquid
		. (Lic	uid, Gaseous, Solid)
	IFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY B		
SHIPPING DESCRIPTION:		HAZARD CLASS:	•
	<del></del>	<del> </del>	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WAS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	TE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LAB	ELED AND IS IN PROPER COND	ITION FOR TRANSPORTATION.
	· .		•
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	Genoin Darber	/	
DATE: 1/25/80	(Authorized Signature)		
.WASTE HAULER*	— — — ·		Circle One)
<del></del>	QUANTITY OF WASTE RECEIVED:	2 CU. YOS.	53
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OF	HER(Specify)	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION F	OR TRANSPORT AND I ACKNO	NLEDGE THE DESTINATION AS
INDICATED:	· .		
(1) Non (+10)		DATE	-1-1 3 <u>2</u> 1 <u>80</u>
(Authorized Signature)			
(2)(Authorized Signature)		. DATE	·//
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			
DIST USAC, STUTINGE, OIL THE ATMENT A POPULA			
	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.		1 0165
	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.	DATE	1,25,80
THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.	DATE	1,25,50
THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.	DATE	1 ,25, 50
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.	DATE	<u>1</u> ,25,5 <u>c</u>
*A HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA  (Authorized Signature)  COMMENTS OR SPECIAL INSTRUCTIONS:			60 65
(Authorized Signature)  COMMENTS OR SECTIAL INSTRUCTIONS:  (N. ILLINOIS: 217 / 782-3637	74 HOUR EMELIGENCY AND SPILL ASSISTANCE NUMBERS*		JTSIDE ILLINOIS: 800 / 424-8802

### STATE OF ILLINOIS

<u>0137409</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

	SPECIAL WASTE HAULING MANIFEST WASTE GENERATOR	Authorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch St.	8 .
(Company Name)	Address	0 9 1 0 5 5 0 0 0 8
Kankakee	IL 60901	14 Generator Number
City .	State Zip	
	WASTE HAULER(S)	
) Kankakee Indestrial Dispos	al 1360 E. Locust	S.W.H. Registration Number 0 0 6 6 0 / 0
Hauler Name	Hauler Address	[25
10.10000000000000000000000000000000000		
Hauler Name (A.B S C C C C C C C	Hauler Address	S.W.H. Registration Number 32
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
Impriesa Chartes Service	Colfax Ave. & C & O R.R.	91808902
(Fidiliy Name)	A STATE OF THE STATE OF THE PARTY OF Address Of the STATE	3 Site Number
Griffith		
Control of the State of City (Section 1)	Tip to State of Control of the State of the	
O BE COMPLETED BY		
WASTE NAME: Acetone	& Contaminates	WASTE PHASE: Liquid
		(Liquid, Gaseous, Solid)
IS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WAST ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR		ND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
DATE: 1/30/80	(Authorized Signature)	
VASTE HAULER*	700	GALLONS (Circle One)
	QUANTITY OF WASTE RECEIVED: 300	52 2 CO. YUS
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OPEN TRUCK	OTHER(Specify)
	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDI	
IDICATED:	THATE AND QUARTITI THAS SEEN ACCEPTED IN PROPER CONDI-	THON FOR TRANSPORT AND T ACKNOWLEDGE THE DESTINATION A
KIN MILL		DATE! 1-701 Pa
/// / Anthorized Signal way VJA	<del>/</del>	DATE: 130 80
/ / / / / / / / / / / / / / / / / / /	•	
	:	DATE://
(Authorized Signature)		DATE:///
(Authorized Signature) ISPOSAL, STORAGE, OR TREATMENT FACILITY*	CATE AND INDICATED QUANTITY HAS DEEN ACCEDITED.	DATE:///
(Authorized Signature) ISPOSAL, STORAGE, OR TREATMENT FACILITY*	STE AND INDICATED QUANTITY HAS BEEN ACCEPTED:	DATE:////
(Authorized Signature)  ISPOSAL, STORAGE, OR TREATMENT FACILITY*  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS  (Authorized Signature)		1 30 80
(Authorized Signature)  ISPOSAL, STORAGE, OR TREATMENT FACILITY*  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS  (Authorized Signature)		1 30 80
(Authorized Signature)  (Authorized Signature)  (ISPOSAL, STORAGE, OR TREATMENT FACILITY*  HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS (Authorized Signature)  (Authorized Signature)  OMMENTS OR SPECIAL INSTRUCTIONS:		1 30 80

#### STATE OF ILLINOIS

<u>0137410</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

Authorization Number 997101 WASTE GENERATOR Miles Laboratories 195 W. Birch St. 0910550008 6 (Company Name) Address Kankakee 60901 WASTE HAULER(S) (1) Kankakee Industrial Disposal 1360 E. Locust S.W.H. Registration Number 0 0 6 6 0 / 0 Hauler Address Hauler Name (1995) DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service Colfax Ave. & C & O R.R. Griffith Indiana 46319 Carried City server and the server TO BE COMPLETED BY WASTE GENERATOR WASTE NAME. Acetone & Contaminates (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Circle One) WASTE HAULER\* QUANTITY OF WASTE RECEIVED: 47 3000 53 TANK TRUCK METHOD OF SHIPMENT (Circle One) DRUMS OPEN TRUCK OTHER \_\_\_\_ I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 1 11/1 / 1 (2) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED: COMMENTS OR SPECIAL INSTRUCTIONS: \_ 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 : 424 3802

PART - 3 SITE

PART - 4 HAULER PART - 5 IEPA

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART I GENERATOR

PART 6 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR	•	• •	
WASTE GENERATOR	STATE OF ILLIN	OIS	0137411
	ENVIRONMENTAL PROTECT		9-19-1-1-
	DIVISION OF LAND POLLUTI	ON CONTROL (	-1 N
	SPECIAL WASTE HAULING	- 1 \	Nuthorization Number 9 9 7 1 0 1
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(Company Name) <b>Kankakee</b>	Address IL	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City	State	210	Generator rember
	WASTE HAULER(S)	<del></del>	
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Kankakee Industrial Disposal	1360 E. Locust	S.V	H. Registration Number $\frac{0}{25}$ $\frac{0}{6}$ $\frac{6}{6}$ $\frac{6}{5}$
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BE COMPLETED BY	The Control of the State of the	en e	en e
ASTE GENERATOR			
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### STATE OF ILLINOIS

<u>0137412</u>

ENVIRONMENTAL PROTECTION AGENCY

	DIVISION OF LAND POLL SPECIAL WASTE HAULI WASTE GENER/	UTION CONTROL ING MANIFEST	Authorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch	St.	8 , 13
(Company Name)	Address		0 9 1 0 5 5 0 0 0 8 Generator Number 24
<u> Kankakee</u>	IL	60901	14 Generator Number 24
City	State WASTE HAULER	Zip	
	MASIE UNOTEK	(3)	
(1) Kankakee Industrial Disposal Hauler Name	1360 E. Locus Hauler Address	i <b>t</b> in the second	S.W.H. Registration Number 0 0 6 6 0/0
(2)			S.W.H. Registration Number
? <del></del>	Hauler Address  DESTINATION — DISPOSAL STORAGE	OF AD TOGATACHY CITE	riud variance filovou i 📝 🥦 ja kranjainistorie 🖣
	· 1888年1987年1987年1988年1988年1988年1988年1988年		
American Chemical Service  (Facility Name)	Colfax Ave. &	C&O R.R.	91808902
Griffith	Address  Indiana  State	46319	39 Site Number
TO BE COMPLETED BY AND A STATE OF THE STATE	and the state of <b>State</b> of the Sangara State of the stat	AN ARTHUR MARKET STATE OF THE S	
WASTE GENERATOR			
WASTE NAME: Aceton	e and Contaminates		WASTE PHASE: Liquid Gaseous, Solid)
			(Liquid, Gaseous, Soild)
		7	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST SHIPPING DESCRIPTION:	IS OF THE DOT HAZARD CLASSIFICATION	I INDICATED IMMEDIATE	LY BELOW:  HAZARD CLASS:
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METHOD OF SHIPMENT (Circle Ope) DRUM		PEN TRUCK	OTHER(Specify)
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(2)			DATE:///
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC	CEPTED:	9 0 80
to the state of th	<del></del>		DATE: 2 / 2 / 35
- (Aprillancea digitature)	<del></del>	<del> </del>	
COMMENTS OR SPECIAL INSTRUCTIONS:		<u> </u>	
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IN ILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL	ASSISTANCE NUMBER	S" OUTSIDE ILLINOIS: 800 / 424 880
	- 2 IEPA PART - 3 SITE	PART 4 HAULER F	PART - 5 IEPA PART - 6 GENERATOR

### STATE OF ILLINOIS

<u>0137413</u>

ENVIRONMENT'AL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

MITES Laboratories  Constitution Manny  Kankakee  Chy  Sale		SPECIAL WASTE HAULING WASTE GENERATO		Authorizatio	on Number 9 9 7 1	01
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Name   Company   Same   Name			<del></del>		<u> </u>	<del></del>
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Hable Name    Name   Continuin   Continuin				S.W.H. Registration Nu	mber 0 0 6 6	010
DESTINATION - DISPOSAL SCREECE REALINET SITE  AMERICAN CARRIES COLORS AVE. & CRO R.R	Hauler Name	Hauler Address				(T <sub>err</sub> )
DESTINATION - DISPOSAL SCREECE REALINET SITE  AMERICAN CARRIES COLORS AVE. & CRO R.R				A CWU Pagistertian N		
AMERICAN CHEMICAL Service  Colfax Ave. & C8Q R.R.  Address  Fig. Griffith  Indianae  Address  Fig. Griffith  MASTERMAND  MASTE	Hauler Name			S.W.n. negistration in	0000er 32	38
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NACCORDANCE WITH THE ABOVE WRITTEN INFORMATION  OATE: 2/3/80  WASTE HAULER*  QUANTITY OF WASTE RECEIVED: 3 D D C COLOR OF CONTROL OF TRANSPORTATION AS METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  DRUMS  TANK TRUCK  OPEN TRUCK		•				
MASTE HAULER*  QUANTITY OF WASTE RECEIVED:			AGED, MARKED. AND LA	ABELED AND IS IN PROPE	R CONDITION FOR TRANSPO	ORTATION,
MASTE HAULER*  QUANTITY OF WASTE RECEIVED: 47 3 D 2 23 CU. 109.  METHOD OF SHIPMENT (Circle One) DRUMS (ANK TRUCK) OPEN TRUCK OTHER (Specify)  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:    DATE 2 / 23 / 50   CAuthorized Signature)  DATE 2 / 23 / 50   CAuthorized Signature)  DATE 3 / 23 / 50   CONTROL TO SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 50   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 23 / 25   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 25   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 25   CONTROL TO SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:    DATE 2 / 23 / 25   CONTROL TO SPECIAL WASTE AND INDICATED AND INDICATED QUANTITY HAS BEEN ACCEPTED SPECIAL WASTE AND INDICATED SPECIAL WA	, ,		0	•		
MASTE HAULER*  QUANTITY OF WASTE RECEIVED:	DATE 2/13/80	Enous	<u>Iarber</u>			
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER	DATE.	(Authorized Signatur	e) ·			
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER	WASTE HAULER*	UNIANTITY OF WASTE BECEIVED.	2041		S (Circle One)	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:    DATE: /		QUARTITY OF WASTE RECEIVED. 4	, — <u>J. 12.12.</u> 1	52	-/53	•
INDICATED:  (Authorized Signature)  (Authorized Signature)  (Authorized Signature)  DATE://  (Authorized Signature)  DATE://  THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:/	METHOD OF SHIPMENT (Circle One) DRU	JMS (TANK TRUCK) OPE	N TRUCK 0	THER(Spe	ecify)	
DATE 2 / 23 / 29  (Authorized Signature)  DATE: /  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE: /  COMMENTS OR SPECIAL INSTRUCTIONS  DATE: /  COMMENTS OR SPECIAL INSTRUCTIONS  DATE: /  2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2	I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WA	ASTE AND QUANTITY HAS BEEN ACCEPTED I	N PROPER CONDITION	FOR TRANSPORT AND 1	ACKNOWLEDGE THE DESTI	NATION AS
2)	INDICATED:					
2)	(1) Don ( 1/2)		•		DATE. 2_/ 23	1 80
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HERE BY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:/	(Adthorized Signature)				54	59
DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:  DATE:/	(2)(Authorized Signature)	<del></del>			DATE:/	-′ —
DATE:	DISPOSAL, STORAGE, OR TREATMENT FACILITY"					
COMMENTS OR SPECIAL INSTRUCTIONS  DATE:/ os		F AND INDICATED CHANTITY HAS BEEN ACCED	TED:			
COMMENTS OR SPECIAL INSTRUCTIONS & 2 1 3 82	THEREOF CERTIFF THAT THE ABOVE DESCRIBED SECURE HASTE	ביייים ייינויטערבט למעעוווו וועס מכנו עמנכנ	ico.	•		
COMMENTS OR SPECIAL INSTRUCTIONS COMMENTS OF SPECIAL INSTRUCTIONS	(Authorized Signature)	<u>_</u>			DATE:/	-/
COMMENTS ON SECURE INSTRUCTIONS.	PUDITION	•	· · · · · · · · · · · · · · · · · · ·		$\gamma_I$	2 KT
N ILLINOIS: 217 / 782-3637 724 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS 7 OUTSIDE ILLINOIS 800 / 424 3802	COMMENTS OR SPECIAL INSTRUCTIONS	<del></del>		<del></del>		<u> </u>
N ILLINOIS: 217 / 782-3637 724 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS 7 OUTSIDE ILLINOIS 800 : 424 8802						
	IN ILLINOIS: 217 / 782-3637	-24 HOUR EMERGENCY AND SPILL AS	SISTANCE NUMBERS	:	OUTSIDE ILLINOIS 8	00 / 424 3802

### STATE OF ILLINOIS

<u>0137414</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

thorization Number 9 9 7 1 0 1

:	WASTE GENERA		Authorization Number $\frac{9}{9}$	7101
Miles Laboratories	195 W. Bir	ch St.	••	٠.
(Company Name)	Address		09105500	800
Kankakee	IL	60901_	14 Generator Num	ber
City	State	Zip		
	WASTE HAULER(	S) .		
Kankakee Industrial Disposal	1360 E. Locust		S.W.H. Registration Number 006	6010
. Hauler Name	Hauler Address		S.W.H. Registration Number 25	
	the state of the s		S.W.H. Registration Number	
Variation (1) Hauler Name	Hauler Address		32 32	Far John
	DESTINATION — DISPOSAL STORAG	E OR TREATMENT SITE		
merican Chemical Service	Colfax Ave. & C	AN R R	<u>9180</u>	R Q A 2
(Facility Name)	Address 7	A CASA-ANDREAS SOCIETA	39 - 31 Site	Number 4-3
eriffith **	Indiana	46319		
न्तरार्थित नेपानिकार करिया है। City के पुरस्कार देश हैं कि अवस्था करिया है।	मार्ग महाकेष State हो नहीं के राजनी	Yes the residence of the second		
BE COMPLETED BY ASTE GENERATOR				
WASTE NAME: Acetone &	Concaminates	WA	STE PHASE: Liquid Gaseous	
				,
IS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE II			CD AND IC IN DOCUME CONDITION COD	
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE		CRAGED, MAKRED, AND LABELI	D AND 15 IN PROPER CONDITION FOR I	KANSPURTATION.
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION (	0		
1 10	Margaret	Sustrest	·	
DATE: 2/15/10	(Authorized Signa	ture)		
ASTE HAULER®		2-20	(Circle One)	
ASTE TROCES	QUANTITY OF WASTE RECEIVED:	<u> 3000                                 </u>	2 68. 103.	
			·	
METHOD OF SHIPMENT (Circle One) DRUI	VIS TANK TRUCK 0	PEN TRUCK OTHER	C(Specify)	
HEREBY CEPTIFE THAT THE ABOVE-DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE	DESTINATION A
DICATED:				1- d
X W Wille	<del></del>	<b>}</b>	DATE:	13/18
(Authorized Signature)		•	34	,
(Authorized Signature)			DATE:/	/
SPOSAL, STORAGE, OR TREATMENT FACILITY*				
HEREBY SERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACC	EPTED.	. ^	16 8
DOB (YOUR)	<u></u>		DATE:	13 ()
(Aŭthorized Signature)				· · · · ·
OMMENTS OR SPECIAL INSTRUCTIONS:			<del></del>	
• • •				
ILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL			101S   800 / 424-88
DISTRIBUTION: PART I GENERATOR PAR	T 2 IEPA PART 3 SITE -	PART-4 ĤAULER PART-5	<u>1EPA</u> PART 6 GENERATOR	

#### STATE OF ILLINOIS

<u>0137415</u>

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL SPECIAL WASTE HAULING MANIFEST

	SPECIAL WASTE HAULING WASTE GENERATO		Authorization Number 9 9 7 1 0 1
Miles Laboratories	195 W. Birch S	t.	
(Company Name)	Address		0910550008
Kankakee	<u>IL</u>	60901	14 Generator Number 2
City	State	Zip	<u> </u>
	WASTE HAULER(S)		
Kankakee Industrial Disposal	1360 E. Locust		S.W.H. Registration Number 0 0 6 6 0 / 0
Hauler Name	Hauler Address		25
2) State of Hauler Name	Hauler Address		s. S.W.H. Registration Number 32
ACCEPTANTATE PROPERTY OF THE PARTY OF THE PA	DESTINATION - DISPOSAL STORAGE	OR TREATMENT SITE	
American-Chemical Service	Colfax Ave. 8	C&O R.R.	91808902
(Facility Name)	Address		Site Number
A CARROLL SECTION City of the second section and the	Indiana State	46319	
BE COMPLETED BY			
ASTE GENERATOR			
WASTE NAME: Acetone & Co	ntaminates	W	ASTE PHASE: Liquid (Liquid, Gaseous, Solid)
가 됐다고 있다. 말이 됐는데 그 사이를 보고 있는데 보다. - 이 사용 가능하는데 하는데 그 사용			(Elding, Gasconz, 2011d)
	<del></del>	· · · · ·	
SHIPPING DESCRIPTION:	· -	-	HAZARD CLASS:
	-	<u> </u>	
HIS IS TO CERTIFY THAT THE ABOYE NAMED SPECIAL WASTE IS PRO N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPART	IMENT OF TRANSPORTATION.	AGED, MARKED, AND LABE	LED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	•		
· · · · · · · · · · · · · · · · · · ·	<i>[ ]</i>	1-1-1-6	
DATE: 2/20/80	(Authorized Signatur	e) ( ( ) ( )	
WART HALLED		· · · · · · · · · · · · · · · · · · ·	(1 GALLONS) (Circle One)
VASTE HAULER*	QUANTITY OF WASTE RECEIVED:	2600	2 eu vos
METHOD OF SHIPMENT (Circle One) DRUMS	TANK TRUCK OPE	N TRUCK OTH	ER(Specify)
HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE A	AND QUANTITY HAS BEEN ACCEPTED I	N PROPER CONDITION FO	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
NDICATED:			
(5,0)			DATE: 3 / 20 / 8 0
(Authorized Signature)			
(Authorized Signature)			DATE:///
ISPOSAL, STORAGE, OR TREATMENT FACILITY*			
NECESTAL AND SECURITIES AND SECURITIES OF CASE MARCHE AND	INDICATED QUANTITY HAS DEEN ASSES	TCD	
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND	HIDIONICU QUARTITI HAS BEEN ACCEP	וכט.	2
(Authorized Signature)			DATE: 2/) CO
(Anthonized Signature)		<u> </u>	
OMMENTS OR SPECIAL INSTRUCTIONS:			
NILLINOIS: 217 / 782-3637	24 HOUR EMERGENCY AND SPILL AS	SISTANCE NUMBERS	OUTSIDE ILLINOIS, 800 / 424 88

	STATE OF ILLINOIS	والمناف والمناف والمنافية
TO BE COMPLETED BY WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 627	° 023450
	(217) 782-6760	$( ( ( \Psi ) )$
	SPECIAL WASTE HAULING MANIFEST	Authorization Number 997101
Miles Laboratories	195 W. Birch St	
(Company Name) <b>Kankakee</b>	Address 60901	0 9 1 0 5 5 0 0 0 8
City ( )	State . Zip	
Kankakee Industrial Disposal	Waste HAULER(S)  1360 E. Locust	0.065.015
Hauler Name 28 EP	Hauler Address	S.W.H. Registration Number 0 0 6 6 0 1 3
Best Time Sales Comment of the Comme	Hauler Address	S.W.H. Registration Number 32
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
American Chemical Service	Colfax Ave. & C & O R.R.	9180890
(Facility Name)	Address	39 - Site Number
CARLES ON CONTRACTOR	IN 46319	
TO BE COMPLETED BY WAS ENDERLY SELECTION	The transfer was the same of t	
WASTE GENERATOR WASTE NAME: ACet	one & Contaminates was	EPHASE Liquid (Liquid, Gaseous, Solid)
		(Liquia, Gascous, Solia)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAN	IFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	BELOW:
SHIPPING DESCRIPTION:		4 -1 -1 -1
	- Flamelli	WEIGHT FOR 38,800 (BS) TONS (circle of
		GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED: 47	2 00-102.
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OPEN TRUCK OTH	R (Specify)
	TE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LA	<b>7</b> · · · · · · · · · · · · · · · · · · ·
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	RMATION	and the second second
DATE: 9/8/80	(Sendo Sales)	
UNIT	(Authorized Signature)	·
WASTE HAULER	-	,
HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL	WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION I	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION A
NDICATED:	· · ·	* ··
(1) 10 - (+10)	<del></del>	🧸 🍇 🖟 . DATE: 🛒 💆 🔝 🕏
(Authorized Signature)		DATE:
(Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY	- HA2/	RDOUS WASTE SUBJECT TO FEE YES NO
HEREBY CERTIFY THAT THE ABOVE DISCRIBED GPZCIA WA	TE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIF	ED ABOVE:
(Authonzed Sygnature)		∞t - D - D
COMMENTS OR SPECIAL INSTRUCTIONS:		
		·
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS	OUTCIDE HANDIG COO / 424 /
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR F		OUTSIDE ILLINOIS: 800 / 424-8 - 5 IEPA PART 6 GENERATOR

STATE OF ILLINOIS \_0234503 TO BE COMPLETED BY ENVIRONMENTAL PROTECTION AGENCY WASTE GENERATOR DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 - SPECIAL WASTE HAULING MANIFEST Authorization Number 🗕 Miles Laboratories 195 W. Birch St. 0 9 1 <u>0 5 5 0 0 0 8 </u> (Company Name) IJ. Kankakee 60901 Generator Number State Zip WASTE HAULER(S) Kankakee Industrial Disposal 1360 E. Locust S.W.H. Registration Number Hauler Name Hauler Address S.W.H. Registration Number. DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE American Chemical Service (Facility Name) The State of Address State of Griffith .... State of Property Commencers of the Commencers o TO BE COMPLETED BY WASTE NAME: (Liquide Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: WEIGHT FOR TONS (circle one) GALLONS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: \_ CONVERTED TO CU. YDS. OR GAL. METHOD OF SHIPMENT (Circle One) DRUMS OTHER (Specify)\_ THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFICATION, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 29 11 80 (Authorized Signature)

(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES.

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

COMMENTS OR SPECIAL INTRUCTIONS:

- \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

IN ILLINOIS: 217 / 782-3637

PART - 2 IEPA PART - 3 SITE PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

#### STATE OF ILLINOIS .

TO BE COMPLETED BY **WASTE GENERATOR** 

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - L GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

0234504

	(217) 782-6760 SPECIAL WASTE HAULING		Authorization Number 997101
Miles Laboratories	195 W. Birch		e 13
(Company Name)	Address '*		· 0910550008 G
Kankakee City	State	60901 \ Zip	14 Generator Number 24
Kankakee Industrial Disposal	waste Hauler(s) 1360 E. Locus		Registration Number 0 0 6 6 8 \$ 8
Hauler Name	Hauler Address		25 31
		SW	H. Registration Number
Hauler Name Line			The registration running is the 32 many time of the 38 and 38 many time of the 38 and
	DESTINATION — DISPOSAL STORAGE (		
American Chemical Service (Facility Name)	Colfax Ave. & C	4 0 R.R.	91808902
Griffith	IN	÷ 46319	Site Number
Commence of the Commence of th	State matter with the state of	in the Zip was a series	
TO BE COMPLETED BY WASTE NAME Acet	one & Contaminates	WASTE PHASE	Liquid
The state of the s		- WASIE PHASE	(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAN SHIPPING DESCRIPTION:			
t in the second	100m→ ×		EIGHT FOR 3570 (BS) O.T. USE 3570 TON'S (circle one
		D	.O.T. USETONS (circle one
	<del>/</del>	<del></del>	(AMANA (C. 11. A. )
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED:	5000	GALLONS (Circle One)
	47	52	53
METHOD OF SHIPMENT (Circle One) D THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WAS		TRUCK OTHER (Spec AGED, MARKED, AND LABELED A	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	E DEPARTMENT OF TRANSPORTATION.	,	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	RMATION		
DATE: 4/16/80	Jenou Da (Authorized Signatu	rker	
WASTE HAULER	(Authorized Signatu	rre) <b>→</b>	
WASTE HAULEN			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL INDICATED:	WASTE AND QUANTITY HAS BEEN ACCEPTED I	N PROPER CONDITION FOR TRA	NSPORT AND I ACKNOWLEDGE THE DESTINATION AS
March B. L. March	<u> </u>		. DATE: _91 151 8
(Authorized Signature)			•
(Authorized Signature)			DATE: 91 161 80
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	STE AND INDICATED QUANTITY HAS BEEN ACCEP		WASTE SUBJECT TO FEE YES NO VE:
70			DATE MOBO
Trucket Ce			<u>∞</u> + <u></u> - <u></u> - <u></u> - <u></u> - <u></u> - <u></u>
COMMENTS OR SPECIAL INSTRUCTIONS:	· ·	, ·	<u>-</u>
•			

\*\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 4 HAULER

PART - 2 IEPA

PART - 5 IEPA

PART - 6 GENERATOR -

OUTSIDE ILLINOIS: 800 / 424-8802

DINISION CAND POLIUTION CONTROL 2200 CHURCHIL ROAD, SPECIAL WASTE HAULING MANIFEST  WHIles Laboratories  195 N. Birch St.  Company Wann Kankakee  11		31 ATE OF ILLINOIS	
MITTER LABORATORIES  (CORRESPONDANCE)  (CORRESPO	TO BE COMPLETED BY	ENVIRONMENTAL PROTECTION AGENCY	123450
HITES Laboratories  (Concease Number)  Kankakee  II  Actives  Sale  10  Sale  10  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  So	WASTE GENERATOR '	DIVISION OF LAND POLLUTION CONTROL	<u> </u>
HITES Laboratories  (Concease Number)  Kankakee  II  Actives  Sale  10  Sale  10  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  So	22		706 , ~ .
HITES Laboratories  (Concease Number)  Kankakee  II  Actives  Sale  10  Sale  10  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  Sale  Sole  So		` ,	( 0)//
MI I Company Name		SPECIAL WASTE HAULING MANIFEST	Juthorization Number 997101
Company Rame)  Kankakee  Lt. Address  Cot  Sale  Sale  Cot  Sale	Miles Laboratories	100 U Damet CA	13
Kankakee Industrial Disposal 1360 E. Locust 5. W.H. Regulation Number 20 0.0 6.8 K.R. Nuleir Name 1360 E. Locust 5. W.H. Regulation Number 20 0.0 6.8 K.R. Nuleir Name 5. W.H. Regulation Number 20 0.0 6.8 K.R. Nuleir Name 5. S.W.H. Regulation Number 20 0.0 6.8 K.R. Nuleir Number 20 0.0 6.8 K.			
WASTE MALIERS  Hauter Name  Hauter Name  Hauter Address  S.W.H. Registration Number  10 0 6 6 8 X.B.  Hauter Name  Hauter Address  S.W.H. Registration Number  10 0 6 6 8 X.B.  Hauter Name  SETTIN AGES C. & O. R.R.  ST. MASTERNALE  S.W.H. Registration Number  20 0 6 6 8 X.B.  Hauter Address  S.W.H. Registration Number  20 0 6 6 8 X.B.  H			09105500086
Kankakee Industrial Disposal  1360 E. Locust  SW.H. Registration Number  130 O 6 6 8 X P  Water Mores  SW.H. Registration Number  130 O 6 6 8 X P  Water Mores  SW.H. Registration Number  131 Service  Colfax Ave. 3 C 8 O R.R.  9 18 0 8 9 0  SSIN MARRIAGE STRUCK  SW.H. Registration Number  132  DESTINATION — DISPOSAL STRUCK ON IRAINEMS STE  RAMERICAN CHEST ON IRAINEMS  SW.H. Registration Number  132  DESTINATION — STRUCK  SW.H. Registration Number  133  DESTINATION  SW.H. Registration Number  134  DESTINATION  SW.H. Registration Number  135  SW.H. Registration Number  136  SW.H. Registration Number  137  SW.H. Registration Number  138  SW.H. Registration Number  137  SW.H. Registration Number  138  SW.H. Registration Number  138  SW.H. Registration Number  138  SW.H. Registration Number  139  SW.H. Registration Number  130  SW.H. Registration Number  130  SW.H. Registration Number  131  SW.H. Registration Number  132  SW.H. Registration Number  133  SW.H. Registration Number  134  SW.H. Registration Number  135  SW.H. Registration Number  136  SW.H. Registration Number  137  SW.H. Registration Number  137  SW.H. Registration Number  138  SW.H. Registration Number  138  SW.H. Registration Number  138  SW.H. Registration Number  138  SW.H. Registration Number  139  SW.H. Registration Number  130  SW.H. Registration Number  1			14 Generator Number 24
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	ILLINOIS: 217 / 782-3637	- *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER	S*. OUTSIDE ILLINOIS: 800 / 424-88
ISTRIBUTION: PART - I GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR			

	STATE OF ILLIN	iois 🦫 🦈 🦈	, , , , , , , , , , , , , , , , , , , ,	
TO BE COMPLETED BY WASTE GENERATOR	ENVIRONMENTAL PROTECT DIVISION OF LAND POLLUTI 200 CHURCHILL ROAD, SPRINGFII	ON CONTROL ELD, ILLINOIS 627(	of Salar	<u>_023450</u> £
	(217) 782-6760	L	100-	007101
	SPECIAL WASTE HAULING	MARIFESI	Authorization Nui	nber 9 9 7 1 0 1
Miles Laboratories	195 W. Birch	St.		
(Company Name)	Address t		091	0 5 5 0 0 0 8 G enerator Number 24
Kankakee City	IL State	60901	14 G	enerator Number 24
	WASTĘ HAULER(S)			
Kankakee Industrial Disposal	1360 E. Locus	<u>t                                      </u>	S.W.H. Registration Number	<u>0 0 6 6 0 1 0</u>
Hauler Name	Hauler Address			
seriose stekkiosia, store Hauler Name 🖟 👝 o o opiniose severiose.		-00 30 3000	S.W.H. Registration Number	32 38
	DESTINATION — DISPOSAL STORAGE (	OR TREATMENT SITE		
: American Chemical Service	Colfar Ava & C	LADD		
(Facility Name)	Address TS	THE ROLL OF THE PARTY OF THE PA	39	9 1 8 0 8 9 0 2
Griffith	IN THE STATE OF TH	46319		
为一种特别的特别的企业,City 是自己的主义是自己的证据	State State	Zip ***		
TO BE COMPLETED BY WASTE GENERATOR	e & Contaminates			
WASTE NAME:	a contaminates	— Wast		d, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFE	ST IS OF THE DOT HAZARD CLASSIFICATION I	NDICATED IMMEDIATELY E	ELOW:	
SHIPPING DESCRIPTION:	HAZARD			
	•		WEIGHT FOR	LBS
-	1 13 mm 3 3	t-m-f-W	D.O.T. USE	TONS (circle one
	<del></del>	· · · · · · · · · · · · · · · · · · ·		Å, E.
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS. OR GAL	QUANTITY OF WASTE DELIVERED:	3000	GALLONS Circl	e One)
METHOD OF SHIPMENT (Circle One) DRU	JMS TANK TRUCK OPEN	TRUCK OTHE	R (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D		KAGED, MARKED, AND LAB	ELED AND IS IN PROPER CON	DITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORM.	ATION -	つ		v. <u> </u>
9/23/80	(henrin D	ärben	_	
DATE:	(Authorized Signatu		· · · · · · · · · · · · · · · · · · ·	f. 'x
WASTE HAULER				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ASTE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION F	OR TRANSPORT AND 1 ACKNO	WLEDGE THE DESTINATION AS
Man a little	<del>2</del>	,1		91278
(Authorized Signatore)			D.	ATE:
(2).		•	D	NTE:
(Authorized Signature)		<u> </u>		
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		HAZA	RDOUS WASTE SUBJECT TO FE	YES NO
I HEREBY CERTIFY THAT THE BOVE-DESCRIBED SPECIAL WASTI	E AND INDICATED QUANTITY HAS BEEN ACCEI	PTED AT THE SITE SPECIFI	ED ABOVE:	9231
(Authorized Signature)		<del>. ,</del>		
COMMENTS OR SPECIAL INSTRUCTIONS:				
W. W. W. W. C. 217 / 702 2022	- *24 HOUR EMERGENCY AND SPILL	A COISTANCE HIMBEDOS		NITCIDE ILLIANDIS. DOD / 424 000
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART 1 GENERATOR PAR			- 5 IEPA PART - 6 GENI	DUTSIDE ILLINOIS: 800 / 424-880. Erator
elegical neighbors and a second control of the second control of t				

SITE COPY - PART 3

	STATE OF ILLINOIS	000450
TO BE COMPLETED BY WASTE GENERATOR	ENVIRONMENTAL PROTECTION AGE DIVISION OF LAND POLLUTION CON	
	. 2200 CHURCHILL ROAD, SPRINGFIELD, ILLIN (217) 782-6760	NOIS 62706 C
	SPECIAL WASTE HAULING MANIFE	
Miles Laboratories	195 W. Birch St.	
(Company Name)	Address	0910550008
Kankakee >	Slate Zig	<del></del>
	WASTE HAULER(S)	9.1 7
Kankakee Industrial Dispo	Hauler Address	S.W.H. Registration Number 25
Hauler Name	The state of the s	S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAGE OR TREATME	
American Chemical Service		
(Facility Name)	Colfax Ave. & C &	O R.R. 9 1 8 0 8 9 0
orititien .	Process of the Process of the Park 46	319
TO BE COMPLETED BY AND	a producer in the control of the con	
	Icetone & Contaminates	WASTE PHASE Liquid
		(Liquid, Gaseous, Solid)
THE CHECIAL WASTE REING TRANSPORTED LINNER TH	IS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IN	MMCRIATELY DELOW
SHIPPING DESCR	and the control of th	miconnect below.
-40mmel	<b>. 2</b>	WEIGHT FOR 39000 LBS D.O.T. USE TONS (circle
		GALLONS Circle One)
WEIGHT FOR LE.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED: 47	<u>O O 32</u>
METHOD OF SHIPMENT (Circle One)	DRUMS TANK TRUCK OPEN TRUCK	OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIA	AL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MAR	KED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATIO
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE		
DATE: 4/26/80	(Authorized Signature)	ber.
WASTE HAULER		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SF INDICATED:	ECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER	CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION
1) (Han	•	DATE:2/ 26/ .
(Authorized Signature)		34
(2) (Authorized Signature)		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY	•	HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPEC	CIAL WASTS AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE	
- JK/14	Man and the	DATE:
(Authorized light (UA)	y ve	
COMMENTS OR SPECIAL INSTRUCTIONS:		
IN ILLINOIS: 217 / 782-3637	~*24 HOUR EMERGENCY AND SPILL ASSISTANCE	E NUMBERS* OUTSIDE ILLINOIS: 800 / 424
DISTRIBUTION: PART - 1 GENERATOR	PART - 2 IEPA PART - 3 SITE PART - 4 HAULER	R PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

#### STATE OF ILLINOIS

0234508

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-8760

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١	1	V	·/	/ uzation Number	g	q	7	1	Ω	•
1	V 1/	1.	Author	172finn Niimhef	_	_	•	_	•	

	SPECIAL WASTE HAULING MANIFEST	Aulborization Number 997101
MILES LABORATORIES	195 W. BIRCH ST.	"
(Company Name)	Address	0910550008
KANKAKEE	IL	0 9 1 0 5 5 0 0 0 8 G Generator Number
City	State Zip	·
KANKAKEE INDUSTRIAL DISPOSAL	WASTE HAULER(S)	SWH Registration Number 0 0 6 6 5 3 3
. Hauler Name	Hauler Address A	S.W.H. Registration Number U U O O B A A B
Hauler Name	Hauler Address	S.W.H. Registration Number 32 33
era e la companya de	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	en de la companya de La companya de la co
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O R.R.	91808902
GRIFFITH	1N 46319	Site Number
Carticle and Explanation City Library Control of the Control	State of the Control of the Control of Contr	
O BE COMPLETED BY WASTE GENERATOR		
WASTE NAME ACETO	NE & CONTAMINATES WAS	TE PHASE LIQUID (Liquid, Gaseous, Solid)
		(Edulu, Gaseous, Solid)
HE SPECIAL WASTE REING TRANSPORTED LINDER THIS MANIFE	EST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	RFIOW
SHIPPING DESCRIPTION:	and the second of the second o	nation of the second
		WEIGHT FOR 35,420 LBS D.O.T. USE TONS (circle on
The state of the s		TONS (circle on
VEIGHT FOR I.E.P.A. USE MUST BE	5000	GALLONS (Circle One)
ONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED: 47 5000	53
METHOD OF SHIPMENT (Circle One) DRU	UMS TANK TRUCK OTH	ER (Specify)
HIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE	IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LA	,
N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE I	DEPARTMENT OF TRANSPORTATION.	
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORM	IATION / JACKS AND	· · · · · · · · · · · · · · · · · · ·
DATE: 10/2/80	(kenora Darber	
	(Authorized Signature)	
WASTE HAULER		, in the second
HEDERY CENTICY THAT THE ADDIVE DESCRIPTO SPECIAL W	ASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	; COR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
NOICATED:	HOLE WAS GOVERNILL THE DESIGN MOCELLES HE I WOLE CONTINUE	LOW INVIDENCE THE PERSONNEL WAS
What down	1.	DATE: 10 02 80
(Authorized Signature)		UAIL 34
2) <del>`</del> ,		DATE:
(Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		ARDOUS WASTE SUBJECT TO FEE YES NO
HEREBY CERTIFY THAT THE ABOVE RESCRIBED SPECIAL WAST	E AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIF	
- Harris		DATE: 19 2 2
(Authorized Signature)	<del></del>	
OMMENTS OR SPECIAL INSTRUCTIONS:		<del>-</del>
	- *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS	0.77007.0.000.000
N ILLINOIS: 217 / 782-3637	TA UARU EMEUATUAT NUR SLIFT NOSISTNUR UNWESUS	<ul> <li>OUTSIDE ILLINOIS, 800 / 424-88</li> </ul>

PART - 3 SITE

PART - Z IEPA

DISTRIBUTION: PART - 1 GENERATOR

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

#### STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY TO BE COMPLETED BY DIVISION OF LAND POLLUTION CONTROL **WASTE GENERATOR** 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST Authorization Number . MILES LABORATORIES 195 W. BIRCH ST. 910550008 (Company Name) KANKAKEE IL 60901 Generator Number State Zip WASTE HAULER(S) 6.70066<u>-01</u> KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number Hauler Name Hauler Address S.W.H. Registration Number Hauler Name Hauler Address 32 DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. S C S O'R.R. (Facility Name) Address A6210 Site Number IN The same of the 46319 State Zip TO BE COMPLETED BY WASTE GENERATOR 🦚 (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION (circle one) GALLONS (Circle One) WEIGHT FOR I.E.P.A. USE MUST BE <u>5000</u> CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)\_ THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: (Authorized Signature) (2) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. DATE DI J COMMENTS OR SPECIAL INSTRUCTIONS

- \* 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS \*

PART - 4 HAULER

PART - 3 SITE

PART - 2 IEPA

PART - 5 IEPA

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR

SITE COPY - PART 3

OUTSIDE ILLINOIS: 800 / 424-8802

PART - 6 GENERATOR

STATE OF ILLINOIS <u> 0234510</u> ENVIRONMENTAL PROTECTION AGENCY TO BE COMPLETED BY DIVISION OF LAND POLLUTION CONTROL **WASTE GENERATOR** 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST Muthorization Number . MILES LABORATORIES 195 W. BIRCH ST. (Company Name) Address 0910550008 KANKAKEE IL 60901 Generator Number State Zip \* WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST: S.W.H. Registration Number Series of the se Hauler Name 🕝 Hauler Address S.W.H. Registration Number Hauler Address A.A DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902 (Facility Name) Address 46319 City The Secretary State of A Page 1 TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES WASTE NAME WASTE PHASE: \_\_\_ (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION WEIGHT FOR GALLONS (Circle One) .WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: \_ METHOD OF SHIPMENT (Circle One) (C. .... DRUMS (TANK TRUCK) :. OPEN TRUCK OTHER (Specify). THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED INTERPRET CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS DATE: 101 Z21 80 DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES. THEREBY CERTIFY THAT THE ADOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: DATE: 1012218 ٠. COMMENTS OR SPECIAL INSTRUCTION - \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 PART - 2 IEPA PART - 3 SITE : PART - 4 HAULER PART - 5 IEPA DISTRIBUTION: PART - 1 GENERATOR PART - 6 GENERATOR SITE COPY - PART 3

### STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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	i					

220	217) 7824 (217)		706
· .	SPECIAL WASTE HAUL		Authorization Number 9 9 7 1 4 9
MILES LABORATORIES	195 W. BIRCI	IST.	1)
(Company Name)	Address		<u> 0910550008                                </u>
KANKAKEE	IL	60901	14 Generator Number 24
City	State	Zip	
VANUEAUUT TURNIOMRIAT RICHOGAT	WASTE HAULI	ER(S)	
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCUST  Hauler Address		S.W.H. Registration Number 0 0 6 6 0 1 2
the state of the s	The state of the s		
			S.W.H. Registration Number
Hauler Name	Hauler Address		32 32
	DESTINATION — DISPOSAL STOR	AGE OR TREATMENT SITE	
AND TOLK OWNER OF THE	COVERY		
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C &		91808902
GRIFFITH	IN	46319	39 Site Number
	State State		
TO BE COMPLETED BY		<b>建</b>	
TO BE COMPLETED BY WASTE NAME ACETONE	& CONTAMINATES	Ale WA	STE PHASE LIQUID
	A Service Cardina and		(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	IT IS OF THE DOT HAZARD CLASSIFICAT	ION INDICATED IMMEDIATEL	Y BELOW: POST TO THE STATE OF T
SHIPPING DESCRIPTION:	HA	ZARD CLASS:	
and the state of t			WEIGHT FOR 33, 600 (LBS) D.O.T. USE TONS (circle on
			Total Circle on
		·	_
WEIGHT FOR I.E.P.A. USE MUST BE		4900	1 GALLONS (Circle One) 2 CII YDS
CONVERTED TO CU. YDS. OR GAL.	UANTITY OF WASTE DELIVERED:	$-\frac{77}{52}$	53
METHOD OF CHIPMENT (Circle Oce) DOUB	AS TANK TRUCK	Open much	THER (B. 17.)
METHOD OF SHIPMENT (Circle One) DRUM			HER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	TACAMED, MARKED, AND C	ABELED AND IS IN PROPER CONDITION FOR IRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION O	1	•
ululon	(	Sante	
DATE: 11/4/00	fenora (Authorized S	-www	
•	■ (wnthoutsed 2)	ignature)	

WASTE HAULER

I HEKEBY CEKINY	THAT THE AROAF-DESCRIPED	SPECIAL MASIE AND	QUANTITI HAS BEEN ACCEPTE	U IN PROPER COMPITION I	TUK IKANSPUKI AND I ALI	KNOWLEDGE THE DESTINATION A	12
INDICATED:	_						
-							

(1) Land Signature)

DATE: 4 04 80

(Authonzed Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES.

NO \_\_\_\_\_

HEREBY CERTIFY THAT THE ABOVE JESENBED SPECIAL WATE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Aignature)

COMMENTS OR SPECIAL INSTRUCTIONS:

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

4 実業

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

IN ILLINOIS: 217 / 782-3637

PART - 2 IEPA PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

#### STATE OF ILLINOIS

TO EFCOMPLETED BY WASTE GENERATOR

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR

#### ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

033405
1 ,

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST Authorization Number 997149 MILES LABORATORIES 195 W. BIRCH ST (Company Name) Address 9 1 0 5 5 0 0 0 8 Generator Number KANKAKEE 60901 TI State Zip WASTE HAULER(S) 1360 E. LOCUST KANKAKEE INDUSTRIAL S.W.H. Registration Number 006601 Hauler Name Hauler Address S.W.H. Registration Number Hauler Name Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE COLFAX AVE. & C & O R.R. AMERICAN CHEMICAL SERVICE (Facility Name) Address GRIFFITH IN 46319 State City Zip TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE: (Liquid, Gascous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION: HAZARD CLASS: WEIGHT FOR 3 FLAMMABLE GALLONS WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: CTANK TRUCK METHOD OF SHIPMENT (Circle One) DRUMS OTHER (Specify). THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE (Authorized Signature) **WASTE HAULER** I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 121 07 84 (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY" HAZARDOUS WASTE SUBJECT TO FEE BOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: I HEREBY CERTIFY THAT THE (Authorited Signature) MENTS OR SPECIAL INSTRUCTIONS:

PART 4 HAULER

PART - 5 IEPA

• 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 3 SITE

PART - 6 GENERATOR

OUTSIDE ILLINOIS: 800 / 424-880.

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

_	SPECIAL WASTE HAUTING	MANIFEST	Authorization Number 991149
MILES LABORATORIES	195 W. BIRCH	ST.	e · 13
(Company Name)	Address		0 9 1 0 5 5 0 0 0 8 G Generator Number 24
KANKAKEE City	IL State	60901	14 Generator Number 24
on	WASTE HAULER(S)	Zip	<del></del>
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number $\frac{0.066012}{25}$
Hauler Name	Hauler Address	i.	25 31
Hauler Name	Hauler Address		S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAGE O	R TREATMENT SITE +	· 1000 - 基础等的1000000000000000000000000000000000000
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C &	A B B	
(Facility Name)	Address Address	V R.N. CASS	91808902
GRIFFITH	IN .	46319	
The same of the sa	State meet the war and the	Zip	LND016360265
TO BE COMPLETED BY WASTE GENERATOR ACE TONE	E & CONTAMINATES		STE PHASE
WASIE NAME		WA	STE PHASE (Liquid, Gaseous, Solid)
) : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1] : [1]			
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION II	DICATED IMMEDIATEL	Y BELOW: Service the Association of Association (Fig. 8)
SHIPPING DESCRIPTION:	HAZARD	CLASS:	
	FLAMMAE	LE	WEIGHT FOR 38, 990 LBS TONS (circle one)
	•		,
		-	(1 GALLONS) (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	UANTITY OF WASTE DELIVERED:	5000	2 co. TUS. I
	47	52	53
METHOD OF SHIPMENT (Circle One) DRUM		•	HER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE I IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CLASSIFIED, DESCRIBED, PACK PARTMENT OF TRANSPORTATION.	AGED, MARKED, AND L	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION	0	
12/3/00	/ /	arber	/
DATE: (1002	(Authorized Signatu		
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAS INDICATED:	STE AND QUANTITY HAS BEEN ACCEPTED I	N PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
D ( 4.0)			12 1 421 60
(1) (Authorized Signature)	<u> </u>		. DATE: 12 03 823
			DATE:
(2) (Authorized Signature)			DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	·	HA	ZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE A REVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEP		. /-
Jun kala	,		DATE:
(Authorized Signature)			60 0.
COMMENTS OR SPECIAL INSTRUCTIONS:	2 5/10TK	12-3-8	<u> </u>
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL AS		
DISTRIBUTION: PART - I GENERATOR PART	- 2 IEPA PART - 3 SITE PART	4 HAULER PAF	RT - 5 IEPA PART - 6 GENERATOR

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 0334060

(217) 782-6760 SPECIAL WASTE HAULING MANIFEST Authorization Number MILES LABORATORIES 195 W. BIRCH ST. (Company Name) Address IL 60901 City State Zip WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number \_ Hauler Name Hauler Address TLD 0744 S.W.H. Registration Number \_ gesterningen der auch Hauler Name Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. (Facility Name)
GRIFFITH Address 医眼睛的 在天赋学学家然 City 的音和中心的音乐之态的 TO BE COMPLETED BY WASTE GENERATOR WASTE NAME. ACETONE & CONTAMINATES WASTE PHASE: (Liquid Gaseous Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: FLAMMABLE GALLONS WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVEBED: Q0500TANK TRUCK METHOD OF SHIPMENT (Circle One) DRUMS OPEN TRUCK OTHER (Specify)\_ THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION **WASTE HAULER** I HEREBY CERTIFY THAT THE MOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS (1) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE YES... AL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: DATE: 221 221 80 (Aythorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 IN ILLINOIS: 217 / 782-3637

SITE COPY - PART 3

PART - 6 GENERATOR

#### STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATON

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

·	SPECIAL WASTE HAULING	3 MANIFEST	Authorization Number $\frac{9971}{8}$
MILES LABORATORIES	195 W. BIRCH S	ST.	ILD048955959
(Company Name)	Address	··	0910550008 6
KANKAKEE	IL	60901	14 Generator Number 24
City	State 🗦 💠	Zip	
	WASTE HAULER(S)	)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		SWH Basis Strate 0066017
Hauler Name	Hauler Address		S.W.H. Registration Number 0 0 6 6 0 1 <u>3</u> 1
			ILD074411745
			S.W.H. Registration Number 32 38
Hauler Name	Hauler Address		32 38
	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & (	C & O R.R.	<u>91808902</u>
(Facility Name)	Address		91808902 39 Sile Number 40 IND016360265
GRIFFITH	IN	46319	
City	State	Zip	
TO BE COMPLETED BY			
WASTE GENERATOR WASTE NAME: ACETO	NE & CONTAMINATES	WA	STE PHASE: LIQUID
			(Liquid, Gascous, Solid)
<u> </u>		_	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	ST IS OF THE DOT HAZARD CLASSIFICATION I	NDICATED IMMEDIATEL	Y BELOW:
SHIPPING DESCRIPTION:	+ HAZARD	CLASS:	_
2			WEIGHT FOR
	FLAM	WBLE	WEIGHT FOR 41,590 LBS TONS (circle one)
			•
			_
WEIGHT FOR I.E.P.A. USE MUST BE		1000	GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	<u>5000</u>	2 CU. YUS. 1
	"	32	33
METHOD OF SHIPMENT (Circle One) DRUI	MS TANK TRUCK OPEN	N TRUCK OT	HER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE I	S PROPERLY CLASSIFIED, DESCRIBED, PACE	KAGED, MARKED, AND L	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	EPARTMENT OF TRANSPORTATION.		
I HEREBY AGREE JO AND CERTIFY THE ABOVE WRITTEN INFORMA	ITION 🔿	0	
1/12/01	( la cata of	Sarber	/
DATE: 1/13/8/			
((()()	(Authorized Signate	ure)	
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	SIE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:	-		
That Nicht			DATE: 1 13 81
(1) (Authorized Signature)	· · · · · · · · · · · · · · · · · · ·	2	UAIE: 1 2 3 59
(Additionated Signature)			0.375
(2) (Authorized Signature)			DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	<del></del>		
			ZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCES	PTED AT THE SITE SPEC	IFIED ABOVE:
402000			DATE / 1 /21 01
(Authorized Signature) /	•	<b>9</b> -	DATE: 2 23 82
		-w 2n	T/2 / /
COMMENTS OR SPECIAL INSTRUCTIONS. Pump	<u>en 3000 (913</u>	<u> 70 - 8 s</u>	TILL T-63 1/13/81 7, 97
Punpe	a) 2000 MLS	TO 141 2	2 T-63 / / /7
PUNNIE	-1) -4020 (4763	10 111 6	
IN HELINOIS 217 / 702 2627	*** HOUR ELEPROPHER AND CO	COLOTA MAS MUNICIPAL	UNITABLE TO THOSE OUR ASSAURAN
IN ILLINOIS. 217 / 782-3637  DISTRIBUTION: PART - L GENERATOR PAR	*24 HOUR EMERGENCY AND SPILL AS T + 2 IEPA PART + 3 SITE PART		OUTSIDE ILLINOIS. 800 / 424 8803 RT - 5 IEPA PART - 6 GENERATOR
GINGUDURUM FARI-INCMERATUR IAR	r a rein toni'd dill TANI	4 HUNTER LAL	AL STEED DOWNING OFFICENTION

### STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

*	SPECIAL WASTE HAULING MANIFEST		Authorization Number 997149	
MILES LABORATORIES	195 W. BIRCH SY.		ILDO489559593	
(Company Name)	Address		0910550008 6	
KANKAKEE	IL	60901	14 Generator Number 24	
City	State	Zip		
WANTER TABLETOTAL DISCOGNI	WASTE HAULER	3)		
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0 0 6 6 0 1 2 1 1 7 4 5 1 1	
Hauler Name	Hauler Address	•	' I L D O 7 <sup>23</sup> 4 4 1 1 7 4 5 <sup>31</sup>	
	<b>1</b>		'	
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number	
	DESTINATION — DISPOSAL STORAG	E OR TREATMENT SITE		
AMERICAN CHEMICAL SERVICE		ECEOR.R.	9 1 8 0 8 9 0 2 39 Site Number 46	
(Facility Name)	- Address	h.e	39 Site Number 46	
GRIFFITH	IN	46319	_ IND016360265	
City	State	Zip		
TO BE COMPLETED BY WASTE GENERATOR ACETOME	& CONTAMINATES		LEWIT	
WASTE NAME:	, o with invites	WAS	STE PHASE: LTQUID (Liquid, Gascous, Solid)	
	,		(1444, 003,003, 30110)	
THE COCCUMENTATION TO AN COORTED LINDED THE MANUESCO	THE OF THE DOT HAZADO OF ACCIDION		L DELOW	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES:			BELUW:	
SHIPPING DESCRIPTION:		RD CLASS:		
	FLAMM	ABLE	WEIGHT FOR 4/1, 560 LBS D.O.T. USE 10NS (circle one)	
	·		_	
WEIGHT FOR I.E.P.A. USE MUST BE		5000	GALLONS (Circle One)	
CONVERTED TO CU. YDS. OR GAL. Q	UANTITY OF WASTE DELIVERED:	-500X	53	
ALCTHOR OF CHIRACTAL (O'. a. C. O)	C TANK TOUCK	EN TOUGH OF	IFD (D	
METHOD OF SHIPMENT (Circle One) DRUM			HER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	CONNECT, MARKED, AND LA	ABELED AND 15 IN PROPER CONDITION FOR TRANSPORTATION,	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	TION M	<i>^</i>		
THEREBY MORE TO AND CENTRE THE ABOVE WITHER HIS ORIGINAL				
DATE: 1/16/81 11000	LEMAIN!	weber		
V C C	— (Authorized Sign	ature)		
WASTE HAULER			•	
		A 8		
HEREBY CERTIFY THAT THE BOVE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS	
The state of the s	•		1	
(I) MINIMA I	_		· DATE: 4 1 14 8 1	
(Authorize Signature)				
(2) (Authorized Signature)	_		DATE:	
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			<del></del>	
DISPOSAL, STURAGE, OR TREATMENT PACIETY	٠,	HAZ	ARDOUS WASTE SUBJECT TO FEE YES NO NO	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC	CEPTED AT THE SITE SPECIF	FIED ABOVE:	
+ NIAMIO	4	•	DATE:/_ /6/ S/_05	
(Authorized Signature)		₩.	0 7 05	
CONTRACTOR COCCIAL INSTRUCTIONS TO 116	DE 1/16/81	7-63 C	Jam & Venne	
COMMENTS OR SPECIAL INSTRUCTIONS:	/ 5 / / 6 / 1 /	· · · · · · · · · · · · · · · · · · ·	The state of the s	
		<u>U</u>		
			0.110.00.00.00.00.00.00.00.00.00.00.00.0	
IN ILLINOIS. 217 / 782 3637	• 24 HOUR EMERGENCY AND SPILL  • 2 IEPA PART • 3 SITE PA		OUTSIDE ILLINOIS 800 / 424 8802  T - 5 IEPA PARI - 6 GENERATOR	
DISTRIBUTION: PART - I GENERATOR PART	Z ICIN (AIX) 3 SITE FA	AKT MAJUKII PAK	1. A ICLY TANK L O GENERATOR	

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

<u>033406</u>3

	SPECIAL WASTE HAULING MANIF	Authorization Number
MILES LABORATORIES	195 W. BIRCH ST.	i L D O 4 8 <sup>e</sup> 9 5 5 9 5 9 <sup>13</sup>
(Company Name) KANKAKEE	Address IL 609	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City		Zip Generator Number 24
KANKAKEE INDUSTRIAL DISPOSAL	WASTE HAULER(S) 1360 E. LOCUST	
Hauler Name :	Hauler Address	S.W.H. Registration Number 0066012
*	· · · · · · · · · · · · · · · · · · ·	ILD074411745
Hauler Name	Hauler Address	S.W.H. Registration Number
	DESTINATION DISPOSAL STORAGE OR TREATM	IENT SITE
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O	R.R. 91808003
(Facility Name) GRIFFITH	Address	39 Site Number
City		6319 IND 0 1 6 3 6 0 2 6 5
TO BE COMPLETED BY		
WASTE GENERATOR WASTE NAME: ACETON	E & CONTAMINATES	WASTE PHASE: LIQUID
		(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES'	I IS OF THE DOT HAZARD CLASSIFICATION INDICATED	IMMEDIATELY BELOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	4. ~
3 A	FLAMMABLE	WEIGHT FOR 4/1580 LBS TONS (circle one
, , <del></del>		
		GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QI	JANTITY OF WASTE DELIVERED:	2 CU. YOS. 1
		-
• • • • • • • • • • • • • • • • • • • •	PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MA	OTHER (Specify)
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	TON /	·
1/26/8/ 11/00	Y Janora Darbe	<u>'</u> Ł
MATE. T	(Authorized Signature)	
WASTE HAULER		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER	R CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
of the sain		DATE: 1 231 81
(1) (Authorized Signature)		
(2) Santonius Signature)	<u> </u>	DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY		HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT TH	HE SITE SPECIFIED ABOVE:
(Authorized Signature)		DATE:
COMMENTS OR SPECIAL INSTRUCTIONS. 70 63	E 1700 CALS.)	1 2 2 2 2
73 785	<del></del>	3 1/27/8; Jan Mungay
		E NUMBERS* OUTSIDE ILLINOIS: 800 / 424 380
IN ILLINOIS 217 / 782-3637  DISTRIBUTION. PART - L GENERATOR PART	+2 IEPA PART - 3 SHE PART - 4 HAULE	

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

·	SPECIAL WASTE HAULING	3 WAINIFES!	Authorization Number 991149
MILES LABORATORIES	195 W. BIRCH	f ST.	ILD048955959
(Company Name)	Address	(0003	0 9 1 0 5 5 0 0 0 8 Generator Number
KANKAKEE City	I L State	60901 Zip	14 Generator Number 24
MANUALUE INDUCTORAL DISPOSAL	WASTE HAULER(S		
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST  Hauler Address	<del></del>	S.W.H. Registration Number 0 0 6 6 0 1 2 I L D 0 7 4 4 1 1 7 4 5
	(Nation Nations		ILD074411745
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number
Hauter Marke	DESTINATION — DISPOSAL STORAGE	OR TREATMENT SITE	37 38
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	5 O P P	0.1.9.0.9.0.0
(Facility Name)	Address	G O K.K.	9 1 8 0 8 9 0 2  39 Site Number 46
GRIFFITH	IN	46319	IND016360265
City	State	Zip	
WASTE GENERATOR WASTE NAME: ACETON	E & CONTAMINATES	luac	TE PHACE. LIQUID
WASTE NAME:		MAS	(Liquid, Gascous, Solid)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL Q  METHOD OF SHIPMENT (Circle One) DRUM THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE OE  I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	S STANK TRUCK OPEN S PROPERLY CLASSIFIED, DESCRIBED, PAC PARTIMENT OF TRANSPORTATION.		ER (Specify)  BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
<u></u>	(Authorized Signat	ure)	<del></del>
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:  (1) (Authorized Signature)	TE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION E	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS $DATE: \frac{1}{54} = \frac{21}{59}$ $DATE:$
DISPOSAL, STORAGE, OR TREATMENT FACILITY		HAZ	ARDOUS WASTE SUBJECT TO FEE YES NO
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE  (Authorized Signature)			
COMMENTS OR SPECIAL INSTRUCTIONS: 1200	2Z O	1/29/81	7-63 Jon Mundy
3300	CALS TO 8 STILL		
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL A		OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART	- 2 IEPA PART - 3 SITE PAR	I - 4 HAULER PART	- 5 IEPA PART - 6 GENERATOR

#### ... STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

	SPECIAL WASTE HAULING MANIFEST		Authorization Number 997149
MILES LABORATORIES	195 W. BI	PCH ST	ILDO48 955959
(Company Name)	Address	11011 511	0910550008 6
KANKAKEE	IL.	60901	14 Generator Number 24
City	State	Zip	
	WASTE HAULES		
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	•	S.W.H. Registration Number 0066012
Hauler Name	Hauler Address		25 31
			1 1 0 0 7 1 1 1 1 1 1 1 5
	<u> </u>		I L D O 5 4 1 5 5 0 8 0
Hauler Name	Hauler Address		32 38
	DESTINATION — DISPOSAL STORA	GE OR TREATMENT SITE	
INCREASE CONTRACTOR CONTRACTOR			
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	& O R.R.	9 1 8 0 8 9 0 2  39 Site Number 46
(Facility Name)	Address	1,600.0	
GRIFFITH	114	46319	IND016360265
City	State	Zip	
TO BE COMPLETED BY WASTE GENERATOR - ACETONE	C CONTINUENCE	•	
WASTE NAME: ACE TONE	& CONTAMINATES	WAS1	E PHASE: LIQUID
			(Liquid, Gascous, Solid)
		<del>_</del>	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	ST IS OF THE DOT HAZARD CLASSIFICATIO	IN INDICATED IMMEDIATELY	BELOW:
SHIPPING DESCRIPTION:	HAZI	ARD CLASS:	
	FLA	MABLE	WEIGHT FOR 36, 970 LBS TONS (circle one)
			GALLONS Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED:	5000	2 CU. YUS. 1
	47	52	53
METHOD OF SHIPMENT (Circle One) DRUP	MS ANK TRUCK 0	PEN TRUCK OTH	ER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE I	S PROPERLY CLASSIFIED. DESCRIBED, P	ACKAGED, MARKED, AND LAI	BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION /	1	
alula.	1 Clare the 1	Kandens	•
DATE: 2/4/8/	Jenou &	Juros	
, , , , , ,	(Authorized Sig	nature)	
WASTE HAULER			
<u> </u>			
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTE	ED IN PROPER CONDITION F	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:			
(1) $(4/2)$		•	DATE: 02 21 041 81
(Authorized Signature)		•	54 59
(2)			DATE:
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		UATA	ODDON'S MACTE CHOICET TO SEE VES NO.
A MERCAN PERSON THAT THE ADOME OF CORDINED CONTAIN MARKET	AND INDICATED QUANTITY HAC DEEN A		IRDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED GOVERNMENT HAS BEEN AN	CELLED AT THE 211F 2LECTE	IEU ABUYE:
			DATE:
(Authorized Signature)		<del>•</del>	ω <del>-</del> υ <sub>δς</sub> .
COMMENTS OR SPECIAL INSTRUCTIONS	· To 110 % T	-63 2/5/81	Im Minoh
COMMENTS ON SI COLD BOSING ON SI		7 70	() ( ())
IN ILLUMOIS, 217 / 792 2627	*24 UNIO EMERCENAV AUR 2001	ACCICTANCE MUMPERS	DITTED CHEINDIS OND / 424 0203
IN ILLINOIS: 217 / 782-3637  DISTRIBUTION PART 1 GENERATOR PAR	.,*24 HOUR EMERGENCY AND SPILI I - 2 IEPA PART - 3 SITE P		OUTSIDE ILLINOIS: 800 / 424-8802 - 5 IEPA PARI - 6 GENERATOR
DISTRIBUTION LAND LIGHTWATON LAN		TAINTE TAINT	J. S THE G GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

•	SPECIAL WASTE HAULII	NG MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH	H ST.	ILD048955959
(Company Name)	Address		0910550008
KANKAKEE	IL	60901	14 Generator Number 24
City	State	Zip	
KANKAKEE INDUSTRIAL DISPOSAL	waste hauler 1360 E. LOCUS		0066012
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number 0. 0 6 6 0 1 2
			TLD-0-7-4-4-1-1-7-4-5
			I L D O 5 4 1 5 5 0 8 0 S.W.H. Registration Number 32 32 38
. Hauler Name	Hauler Address		32 38
	DESTINATION DISPOSAL STORAG	SE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	& O R.R.	9 1 8 0 8 9 0 2 39 Site Number 46
(Facility Name)		h(ana	
GRIFFITH City	IN State	46319 Zip	IND016360265
TO BE COMPLETED BY	oute -	Ziy	······································
WASTE GENERATOR	E & CONTAMINATES	11/4 07	F PHASE LIQUID
WASTE NAME: ACE TO S		WASI	E PHASE: LICUID (Liquid, Gascous, Solid)
			•
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	I IS OF THE DOT HAZARD CLASSIFICATION	 N indicated immediately i	BELOW
SHIPPING DESCRIPTION:		RD CLASS:	
			WEIGHT FOR 37, 409 LBS
	FLAM	MABLE	WEIGHT FOR 37, 400 LBS TONS (circle one)
•	·		•
	<del></del>	<del></del>	I GALLONS Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QU	JANTITY OF WASTE DELIVERED:	5000	2 00.105. 1
	47	32	53
	S TANK TRUCK OF	PEN TRUCK OTH	ER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEI	PROPERLY CLASSIFIED, DESCRIBED, PARTMENT OF TRANSPORTATION	ACKAGED, MARKED, AND LA	BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
	_	_	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION	0	
DATE: 2/9/8/ NOT	Genoin V	)anbell -	·-
W OO	(Authorized Sign	nature)	
WASTE HAULER			
			•
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:	IE AND QUANTITY HAS BEEN ACCEPTE	D IN PROPER CONDITION F	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
0 Dod +101			DATE: 0 2 0 91 8/
(Authorized Signature)		•	59
(2)(Authorized Signature)			. DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY"		1/474	DRANG WARTE CURICAT TO FEE VEC
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC		RDOUS WASTE SUBJECT TO FEE YES NO IED ABOVE:
(Authorized Signature)	ne de la companya de		DATE: 2 9 8 1.05
	2/78 2/9/81	7/2 /	500 8 /
COMMENTS OR SPECIAL INSTRUCTIONS: To /	2/ 72 2/9/8! ·	7-63 Jam	1x/mghy
		(/	100
			01/20/20/20/20/20/20/20/20/20/20/20/20/20/
IN ILLINOIS: 217 / 782-3637  DISTRIBUTION: PART - L GENERATOR PART	*24 HOUR EMERGENCY AND SPILL - 2 IEPA PART - 3 SITE PART		OUTSIDE ILLINOIS. 800 / 424 8802 - 5 IEPA PART - 6 CENERATOR
DISTRIBUTION: PART - I GENERATOR PART	- E ICLD FART - 3 SHE PA	MI 4 HAULER FART	TARTED UTRAINED

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

	SPECIAL WASTE HAULING MANIFEST	Authorization Number 9 9 7 1 4 9
MILES LABORATORIES	195 W. BIRCH ST.	ILD048955959
Y (Company Name).	Address	-
KANKAKEE	IL . 60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City	State Zip	
KANKAKEE INDUSTRIAL DISPOSAL	WASTE HAULER(S) - 1360 E. LOCUST	
Hauler Name	Hauler Address	S.W.H. Registration Number 0_ 0_ 6_ 6_ 0_ 1_ 3_1
		ILD054155080
		S.W.H. Registration Number
Hauler Name	Hauler Address	32 38
<i>)</i>	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	1
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	
(Facility Name)	Address	
GRIFFITH	IN 46319	IND016360265
City	State Zip	
TO BE COMPLETED BY WASTE GENERATOR		. ,
WASTE NAME: ACETON	E & CONTAMINATES -	WASTE PHASE: LIQUID
•		(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES		TELY BELOW:
SHIPPING DESCRIPTION: 1	HAZARD CLASS:	WEIGHT FOR ALL ALTER AND
		WEIGHT FOR 41, 470 LBS TONS (circle one)
?		
<del></del>		
WEIGHT FOR I.E.P.A. USE MUST BE	5000	GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL Q	QUANTITY OF WASTE DELIVERED: 47 35	
METHOD OF SHIPMENT (Circle One) DRUN	MS TANK TRUCK OPEN TRUCK	OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS		
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	EPARTMENT OF TRANSPORTATION.	·
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	ITION O	MODY
2/12/21	Jenora Larber	110
DATE:	(Authorized Signature)	·
WACTE HALLED	4	
WASTE HAULER	إسينا	r <sup>i</sup>
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED TO PROPER CONDITI	ON FOR TRANSPORT AND 1 ACKNOWLEDGE THE DESTINATION AS
INDICATED:	_	
$0$ $\mathcal{O}_{\infty}(A_{12})$		DATE: 02 /2 8/
(Authorized Signature)	<del>-</del>	34 37 35
(2)		DATE:
(Authorized Signature)	A STATE OF THE STA	
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE		ECIFIED ABOVE:
th Resident	<i>*</i>	DATE: 2/2/
(Authorized Signature)		UAIŁ: 60 / 61
- /2	2/ R T-63 2/12/81 On	9W 1 '
COMMENTS OR SPECIAL INSTRUCTIONS: 70 12	1/72 T-63 2/148) J	m / fund
		1 %
IN ILLINOIS. 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER 1 - 2 IEPA PART - 3 SITE PART - 4 HAULER	RS* OUTSIDE ILLINOIS. 800 / 424-8802 PART - 5 IEPA PART - 6 GENERATOR
DISTRIBUTION: PART   CENERATOR PART	THE CHAIN THAT S SHE FART & BRULLA	TANT - D TENENTALION

The Cleted BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HALLING MANIEST

0334068

	SPECIAL WASTE HAULIN	IG MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH	ST.	ILDO48955959
(Company Name) KANKAKEE	Address IL	foooz	<u>0910550008</u> <sub>G</sub>
City	State	<u> </u>	14 Generator Number 24
KANKAKEE INDUSTRIAL DISPOSAL	WASTE HAULER	S)·	
Hauler Name	1360 E. LOCUST	<del></del>	S.W.H. Registration Number $\frac{0.0660012}{23}$
nauler manie	USUIST WOULESS	ı	ILD054155080
			S.W.H. Registration Number
Hauler Name	Hauler Address	F OR TREATMENT OUT	32 38
	DESTINATION — DISPOSAL STORAG	E OK IKEAIMENT SHE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C.	S O R R	9 1 8 0 8 9 0 2 Site Number 44
(Facility Name)	Address	1.6000	
GRIFFITH City	IN State	46319 Zip	_ INDO16360265
TO BE COMPLETED BY	· · · · · · · · · · · · · · · · · · ·		
WASTE GENERATOR WASTE NAME: ACETONE	& CONTAMINATES	WA	ISTE PHASE: LIQUID
•			(Liquid, Gascous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION		Y BFIOW:
SHIPPING DESCRIPTION:		ID CLASS:	
			WEIGHT FOR 39,680 LBS TONS (circle one
			D.U.T. USETUNS (circle one
	<del></del>	· · · · · · · · · · · · · · · · · · ·	
WEIGHT FOR I.E.P.A. USE MUST BE	UANTITY OF WASTE DELIVERED:	5000	1 GALLONS (Circle One) 2 CU. TUS.
CONVERTED TO CU. YDS. OR GAL. Q	UANTITY OF WASTE DELIVERED. 47	52	53
METHOD OF SHIPMENT (Circle One) DRUM			THER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CLASSIFIED, DESCRIBED, PA PARTMENT OF TRANSPORTATION.	CKAGED, MARKED, AND L	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	tion ( )	1	
2/10/81 27	( lours of	auten	
DATE: 2/18/81 U9TY	(Authorized Sign:	(L)(J)(JV	
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:	TE AND QUANTITY HAS BEEN ACCEPTED	IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
( 5/1)			2211616
(1) (Authorized Signature)	<del></del> ;		DATE: 02/8/8/8/
(2)			DATE:
(Authorized Signature)		<del></del>	· · · · · · · · · · · · · · · · · · ·
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		НА	ZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACC	CEPTED AT THE SITE SPEC	IFIED ABOVE:
Jan B. Mary			DATE 2
(Authorized Signature)	1		0.00
COMMENTS OR SPECIAL INSTRUCTIONS: 70	10x 2/18/81	T-63 9m	n Muzhy
			100
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL	ACCICTANCE WINABERS	OUTSIDE ILLINOIS: 800 / 424-889
			RT 5 IEPA PART 6 GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 0334069

	-		Authorization Number
MILES LABORATORIES	195 W. BIF	RCH ST.	I¦LD048955959"
(Company Name)	Address	_	0 9 1 0 5 5 0 0 0 8 G
KANKAKEE	IL .	60901	14 Generator Number 24
City	State	Zip	
MANUAL THE THEORY IN THE TABLE	WASTE HAUL		
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCUS	<u> </u>	S.W.H. Registration Number 0 0 6 6 0 1 2
nauler Name	Maulet Address		ILD05 <sup>2</sup> 4155080 <sup>31</sup>
Hauler Name	Hauler Address		S.W.H. Registration Number
	DESTINATION — DISPOSAL STO	RAGE OR TREATMENT SITE	36
			•
AMERICAN CHEMICAL SERVICE	COLFAX AVE.	& C & O R.R.	91808902
(Facility Name)	Address		9 1 8 0 8 9 0 2 Site Number 46
GRIFFITH	IN	<u>46319</u>	- 1000360606
City	State	Zip	- INDO16360265
TO BE COMPLETED BY		<u> </u>	
WASTE GENERATOR WASTE NAME: ACETONE	& CONTAMINATES	WAS	STE PHASE: LIQUID
			(Liquid, Gascous, Solid)
		<del></del>	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARD CLASSIFICAT	ION INDICATED IMMEDIATELY	BELOW:
SHIPPING DESCRIPTION:	НА	ZARD CLASS:	
	<b>₹</b> ,		WEIGHT FOR LBS
	<del>_</del>	<del></del>	D.O.T. USETONS (circle one)
		•	
· <del></del>			GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE	ANTITY OF WASTE DELIVERED:	5000	2 CU. TUS.
CONVERTED TO CU. YDS. OR GAL QU	ANTITY OF WASIE DELIVERED. 47		53
METHOD OF SHIPMENT (Circle One) DRUMS	S TANK TRUCK	OPEN TRUCK OTH	HER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS		- · ·	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEP			SECTED AND IS IN THAT EN CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATI	ION O	1	•
0/24/01		K	
DATE: 2/25/8/	JMMAN	DUNKE	•
, , , , , ,	// (Authorized S	ignature)	
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAST	E AND QUANTITY HAS BEEN ACCEP	TED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:			
10 1 MARIA KIND			DATE: 2 24 81
(Authorized Signature)		3	54 0 7 59
(2)			DATE:/
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		ua?	ARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	NO INDICATED OHANTITY HAS REEN		
THEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE A	IND INDICATED GOARTH TIMO DEER	NOOLI TED AT THE SITE SI EGI	
1503 Million			DATE
. (Antuotisea 2/Bustale)		<del></del>	~ · · · · · · · · · · · · · · · · · · ·
COMMENTS OR SPECIAL INSTRUCTIONS:	OK 4000 GG	us 7-63	2/24/81 Sam Muzh/
1.1)-	k 1000 C/	165 T-63	strules the Into Up
70 /4/	~ /500 (**		1-11 Jam Milan
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPI	LL ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424:8802
	2 IEPA PART - 3 SITE		I - 5 IEPA PARI - 6 GENERATOR

TO ... . ETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0334070

	SPECIAL WASTE HAL	ILING MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BI	RCH ST.	i L D O 4 8 9 5 5 9 5 9 13
(Company Name)  KANKAKEE	Address	60901	0910550008 C Generator Number
City	State WASTE HAU	Žip	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	• •	0.066032
Hauler Name	Hauler Address		S.W.H. Registration Number 0 0 6 6 0 1 2 1 1 5 5 0 8 0
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number
	DESTINATION — DISPOSAL STO	PRAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. 8	C & O R.R.	91808902
(Facility Name)	Addres	\$	9 1 8 0 8 9 0 2 Site Number 46
GRIFFITH	IiV	46319 Zio	IND016360265
TO BE COMPLETED BY	State	Ziy	
	NE & CONTAMINATES	WAS:	TE PHASE: LIQUID
			(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION:		AZARD CLASS:	WEIGHT FOR LBSTONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED:	5000	GALLONS (Circle One)
CONTENTED TO GO. TO S. ON ONC	47	52	53
METHOD OF SHIPMENT (Circle One) DRU THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	IS PROPERLY CLASSIFIED, DESCRIBED		ER (Specify)BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORM  DATE: 205/8/ (108)	ATION ALMO (Authorized	Bailes Signature)	
WASTE HAULER	·		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	ISTE AND QUANTITY HAS BEEN ACCE	PTED IN PROPER CONDITION I	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(1) G'eary Held (1) (A)thorized Signature)			DATE. $\frac{2}{2} \int \frac{25}{50} \frac{8}{50}$
(2)(Authorized Signature)	<del></del>		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		. нат	ARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAST	E AND INDICATED QUANTITY HAS BEEN		
PORAuthorized Signature Chil			DATE:
COMMENTS OR SPECIAL INSTRUCTIONS: 3400	70 110x 7	-63 2/2	5/81 Jam Mungh
1600	TO 12/72 7	<u> </u>	<u>' ()                                   </u>
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION. PART - I GENERATOR PAR	*24 HOUR EMERGENCY AND SP RT - 2 IEPA PART - 3 SITE		OUTSIDE HLINOIS. 800 / 424-8802

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

$\mathcal{F}'$			Authorization Number 2 2 1 1 4 9
MILES LABORATORIES	195 W. BIRCH	ST	ILD048955959
(Company Name)	Address	<del></del>	0910550008 .
KANKAKEE	ΙL	60901	Generator Number 24
City	State	Zip	
	WASTE HAULER	(S)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W H. Registration Number $\frac{0.06601}{25}$
Hauler Name	· Hauler Address	·	3.W n. Registration Number 25 31
			1 L D O 5 4 1 5 5 0 8 0
			S.W.H. Registration Number
Hauler Name	Hauler Address		32 38
	DESTINATION — DISPOSAL STORAG	GE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	8 O R.R.	91808902
(Facility Name)	Address		9 1 8 0 8 9 0 2 Site Number 44
GRIFFITH	IN	46319	INDO16360265
City	State	Zip	
TO BE COMPLETED BY			
WASTE GENERATOR WASTE NAME: ACETONE	& CONTAMINATES	WA	ISTE PHASE: LIQUID
			(Liquid, Gaseous, Solid)
·	<del></del>	<u></u>	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	ST IS OF THE DOT HAZARD CLASSIFICATIO	N INDICATED IMMEDIATEL	Y BELOW:
SHIPPING DESCRIPTION:		RD CLASS:	. octon.
SHIFFING DESCRIPTION.	пада	inu cuass.	
			WEIGHT FOR 4/60 LBS D.O.T. USE 10NS (circle one)
			TONS (circle tille)
			1 GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	5000	2 CU. YDS: 7
CONTENTED TO CO. 123. ON ONE	47	52	53
METHOD OF SHIPMENT (Circle One) DRUM	MS TANK TRUCK O	PEN TRUCK OT	THER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE I		- · · · · · · · · · · · · · · · · · · ·	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	EPARTMENT OF TRANSPORTATION.	MONAGED, MARKIED, AND E	ADDEED AND 13 IN 1 HOLER CONDITION FOR TRANSFORMATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	Thu ().	1	
THEKERY ACKEE TO AND CENTIFY THE ABOVE MATTER HAT DAMA	, , , , , , , , , , , , , , , , , , ,	KI	
DATE: 3/3/8/	HOMOLOW!	ロヘルもしん	
11.0	(Authorized Sign	nature)	
WASTE HAULER	<u> </u>		
THASTE HADLEN			
I HERERY CERTIEY THAT THE ARRIVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTE	D IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:	5,25 <b>Q</b> 5 , ,,,,,,, ,,,,,,,,,,,,,,,,,,,	S III THOI ER CONSTITUTION	TOWN MINIOUS ON AND PACIFIC DESTINATION AS
			215171
(1)	<u> </u>		DATE: 31 21 5/
L'(Authbrized Bigitature)			
(2)			DATE
/ (Authorized Signature)		·	
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		НА	ZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC		
202 0112110 M			) ) ( )
W - Quithdized Sanahura			DATE SOLUTION SALES
(Authorized Signature)			
COMMENTS OR SPECIAL INSTRUCTIONS: 3500	GALS TO 1/07	7-63	3/3/8/ Jm Minch
tea.			111/10/
/ 1345	/	·	
IN (LLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL	ACCICTANCE NUMBERS	• OUTSIDE ILLINOIS. 800 / 424 8892
			RT - 5 IEPA PART - 6 CENERATOR
Grannostion, this togetherion			

→ BE COMPLETED BY WASTE GENERATOR

DISTRIBUTION: PART - L GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0334072

SPECIAL WASTE HAULING MANIFEST

	STECIME WASTE TIMOS	MAINIES!	Authorization Number 991149
MILES LABORATORIES	195 W. BIRC	H_ST.	ILD048955959
(Company Name)	. Address	(2222	0 9 1 0 5 5 0 0 0 8 G
KANKAKEE	I L State	60901 Zip	Generator Number 24
	WASTE HAULE	ER(S)	
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCUST  Hauler Address	<del></del>	S.W.H. Registration Number 0 0 6 0 1 2
	•		ILD054155080°
Hauler Name	Hauler Address		S.W.H. Registration Number
	DESTINATION — DISPOSAL STOR	AGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C	& O.R.R.	91808902
GRIFFITH City	N	46319 Zio	IND016360265
TO BE COMPLETED BY	2/4/6	210	
WASTE GENERATOR WASTE NAME: ACETONE	& CONTAMINATES	WAS	TE PHASE: LIQUID
			(Liquid, Gàscous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFE	ST IS OF THE DOT HAZARD CLASSIFICATI	 ION INDICATED IMMEDIATELY	BELOW:
SHIPPING DESCRIPTION:	HA	ZARD CLASS:	
			WEIGHT FOR LBS
WEIGHT FOR I.E.P.A. USE MUST BE		V-0.0.0	1 GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	<u> </u>	2 CU: 105
METHOD OF SHIPMENT (Circle One) DRU	MS: TANK TRUCK	OPEN TRUCK OTH	IER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	IS PROPERLY CLASSIFIED, DESCRIBED, FPARTMENT OF TRANSPORTATION.	PACKAGED, MARKED, AND LA	BELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA		0	
DATE: 3/9/8/	y ( ke as ar a	Duber	,
DATE: J //O	(Authorized Si		
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WA	STE AND QUANTITY HAS REEN ACCED.	TED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:	ore mile goment me been model		TO THE PROPERTY OF THE PERIOD AS
(1) Occup (Authorized Signature)			DATE: 319181
(2) (Authorized Signature)	<del></del>		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			ADDONIC WHOLE CHOICE TO FEE VEG
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	E AND INDICATED QUANTITY HAS BEEN (		ARDOUS WASTE SUBJECT TO FEE YES NO
(Authorized Signature)			DATE: 2509 X
COMMENTS OR SPECIAL INSTRUCTIONS:	110 及 ア-63	3/9/8/	Jom Muzel
		' ' '	/ / / / /
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPIL	1 ACCICTANCE NUMBERS	OUTSIDE ILLINOIS 800 / 424-88

PART - 6 GENERATOR

TO BE COMPLETED BY **WASTE GENERATOR** 

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

	SPECIAL WASTE HAULI	ING MANIFEST	Authorization Number 9 9 7 1 4 9	
MILES LABORATORIES	195 W. BIRG	CH ST.	Authorization Number 9 9 7 1 4 9 I L D O 4 8 9 5 5 9 5 9 <sup>13</sup>	
(Company Name)	Address		0910550008	
KANKAKEE	ΙL	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24	
City	State	Zio	actional training	
	WASTE HAULE			
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	(0)	0066013	
Hauler Name	Hauler Address	<u> </u>	S.W.H. Registration Number 0 0 6 6 0 1 3	
			ILD054155080	
Hauter Name	Hauler Address	·	S.W.H. Registration Number	
	DESTINATION — DISPOSAL STORA	ACC OD TOTATMENT CITE	27 70	
	DESTINATION — DISPOSAL STOR	AGE OR INCAIMENT SITE	•	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C		0.1.0.0.0.0	
(Facility Name)	Address	GU K.K.	91808902 39 Site Number 40 INDO16360265	
•		li Caro	TNDOISSEAUMBER **	
GRIFFITH	IN State	46319	_ 180010300205	
City	State	Zip		
TO BE COMPLETED BY WASTE GENERATOR				
WASTE NAME: ACE TONE	& CONTAMINATES		STE PHASE: LIQUID	
			(Liquid, Gascous, Solid)	
<del></del>				
SHIPPING DESCRIPTION:		ARD CLASS:	WEIGHT FOR 4/1 / COO LBS TONS (Circle one)	
		• • • • • • • • • • • • • • • • • • • •	U.O.1. USE TONS (circle one)	
	<del></del>			
WEIGHT FOR I.E.P.A. USE MUST BE		5000	1 GALLONS (Circle One)	
CONVERTED TO CU. YDS. OR GAL	UANTITY OF WASTE DELIVERED:	$-\underline{S}\underline{U}\underline{U}\underline{V}_{\frac{32}{32}}$	53	
			••	
METHOD OF SHIPMENT (Circle One) DRUI			HER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE	S PROPERLY CLASSIFIED, DESCRIBED,	PACKAGED, MARKED, AND L	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	PARIMENT OF TRANSPORTATION			
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION TION	$\sim$		
1 1		Carber Isl	<i>,</i> )	
DATE: 2/12/8/			$\mathcal{O}$	
, , -	// (Authorized Sig	gnature)	·	
WASTE HAULER				
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPT	ED IN PROPER CONDITION	FOR TRANSPORT AND LACKNOWLEDGE THE DESTINATION AS	
INDICATED: \ ) (   \ \ ,	•		·	
// */ III / /	į.		2 1,7,01	
(I) MAINTAN	<u>,</u>		DATE: 3_1 1_2181_	
(Authorized Signature)			34 34	
(2)	<del></del>		DATE:	
\ (Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			TADDONE WAS IN SUBJECT TO SEE VES NO.	
	AND INDICATED OUTSITY OF BEEN		ARDOUS WASTE SUBJECT TO FEE YES NO	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN A	CULPTED AT THE SITE SPECT		
- 13012 17 17 1211 1º			DATE A LU	
(Authorized Signature)			60 65	
1,	ST 7 /3 2	1,2/91	900	
COMMENTS OR SPECIAL INSTRUCTIONS:	OR 7-6.3 3/	12/8/ Jan	1/fresh	
			100	
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPIL	L ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802	
			RT - 5 IEPA PART - 6 GENERATOR	

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0334074

	SPECIAL WASTE HAUL	ING MANIFEST	Authorization Number 997149	
MILES LABORATORIES	195 W. BIRCH	ST.	ILD048955959	
(Company Name)	Address		0910550008 -	
KANKAKEE	ΙL	. 60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24	
City	State	Zip		
	WASTE HAUL			
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		0.066012	
Hauler Name	Hauler Address	· .	S.W.H. Registration Number 0 0 6 6 0 1 2 I L D 0 5 4 1 5 5 0 8 0	
			ILD054155080	
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number	
	DESTINATION — DISPOSAL STOR	ACE OD TREATMENT SITE		
	Jestiminan Bis Gove Ston	NOC ON INCAINENT SITE		
AMERICAN CHEMICAL SERVICE	COLFAX AVE. 8	CEOPP	0100000	
(Facility Name)	Address	C G O K.K.	_ <u>9 1 8 0 8 9 0 2</u> 39 Site Number 44	
GRIFFITH	IN	46319	,	
City	State	40319 Zio	_ INDO16360265	
والمناسب والمستون والم والمستون والمستون والمستون والمستون والمستون والمستون والمستو	0,0,0	Zip		
TO BE COMPLETED BY WASTE GENERATOR ACETONIC	S CONTAMINATES	7		
WASTE NAME: ACE TONE	& CONTAMINATES	_ v ეე Ума	STE PHASE: LIQUID (Liquid, Gaseous, Solid)	
		H()	(Liquia, Gascous, 20110)	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICAT	ION INDICATED IMMEDIATELY	r BELOW:	
SHIPPING DESCRIPTION:	HA	ZARD CLASS:		
	•		WEIGHT FOR 39, 600 LBS O.O.T. USE TONS (circle one)	
	<del> </del>		_ D.O.T. USE TONS (circle one)	
			• •	
<u></u>	<del></del>		_	
WEIGHT FOR I.E.P.A. USE MUST BE	7	5000	GALLONS (Circle One)	
CONVERTED TO CU. YDS. OR GAL Q	UANTITY OF WASTE DELIVERED:	5000	2 CO. YDS. 1	
	*/	31	27	
METHOD OF SHIPMENT (Circle One) DRUM	IS TANK TRUCK	OPEN TRUCK OT	HER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS	S PROPERLY CLASSIFIED, DESCRIBED,	PACKAGED, MARKED, AND L	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARIMENT OF TRANSPORTATION.			
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAL	TION	· ^		
2/10/21		Burler	,	
DATE: 3/18/8/	AMMIN	<u> </u>		
	(Authorized S	gnature)	<u> </u>	
WASTE HAULER	•	•		
	in the second second second	k i le		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEP	TED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS	
INDICATED:				
# 111 12 MA			3,10,01	
	<del></del>		DATE	
(Authorized Signature)		•		
(2)	<del></del>		DATE:	
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY.		, NA	PARDOUS WASTE SUBJECT TO FEE YES NO	
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE	AND INTERACTOR OLIANTITY HAS BEEN			
THEKERA CERTIFIT THAT THE ABOVE-DESCRIBED SPECIAL MASIC	AND MOTCHIED QUARTITY THAS BEEN	HOOFE IED HE LUIC 2015 21 FOI	TIED ABOVE	
1/12/200	مراجع المتحارية		DATE	
(Authorized Signatures)	The state of the s		60 65	
- To 111	o ア フェム3	3/28/81 Q	$m \mathcal{M}_{rod}$	
COMMENTS OR SPECIAL INSTRUCTIONS		-1/3/01 A	··· And was a second	
		' 0		
"LINOIS. 217 / 782-3637	*24 HOUR EMERGENCY AND SPI			
TION: PART LIGENERATOR PART	- 2 IEPA PART 3 SITE	PART 4 HAULER PAR	IT - 5 IEPA PART - 6 GENERATOR	

### STATE OF ILLINOIS ....

TO BE COMPLETED BY **WASTE GENERATOR** 

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0334075

•	SPECIAL WASTE HAULIN	NG MANIFEST	Authorization Number $\frac{9971}{8}$
MILES LABORATORIES	195 W. BIRCH	CT.	I L D O 4 8 9 5 5 9 5 9
(Company Name)	Address	J1.	
KANKAKEE	IL	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City	State	Zip	
-	WASTE HAULER	• •	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number0
Hauler Name	Hauler Address		1 L D O 5 4 1 5 5 0 8 0
•			
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAG	SE OR TREATMENT SITE	
	•		
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	SOR.R.	9 1 8 0 8 9 0 2 Site Number 46
(Facility Name)	Address		39 Site Number 46
GRIFFITH	IN	46319	- INDO16360265
City	State	Zip	
TO BE COMPLETED BY WASTE GENERATOR  ACETONS	& CONTAMINATES		LIOUID
WASTE NAME: ACE TO RE	6 CONTA INTES	WAS	STE PHASE: LIQUID (Liquid, Gaseous, Solid)
	•		, (44-4-1, 4-3-3-3-4, 4-4-4,
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFE SHIPPING DESCRIPTION:		n indicated immediately RD Class:	WEIGHT FOR /// /- OO LBS
			D.O.T. USE 77 COO TONS (circle one)
			3
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED:	5000	1 GALLONS (Circle One) 2 CU-YDS: 1 33
METHOD OF SHIPMENT (Circle One) DRU THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	IS PROPERLY CLASSIFIED, DESCRIBED, P.		HER (Specify)ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
THEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 3/24/8/	ATION JANAA (Authorized Sign	Parber Darber	400>
WASTE HAULER	•		/
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED:  (1) (Authorized Signature)	STE AND QUANTITY HAS BEEN ACCEPTE	D IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
(2) (Authorized Signature)	· - <del></del>		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY			PARROUGH WASTE SHOULST TO SEE THE SEE
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AC		FIED ABOVE:  DATE:   DATE:  D
COMMENTS OR SPECIAL INSTRUCTIONS: PUmper	) TO 1/OR T-	63 3/24/8	1 Jam Mingh
W. W. W. G. C. 202 202 202 202 202 202 202 202 202 20	***************************************	40014741105	OUTCORE HUMANIE BOOK - 104 0000
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION. PART - I CENERATOR PAR	*24 HOUR EMERGENCY AND SPILL T - 2 IEPA PART - 3 SIJE PA		OUTSIDE ILLINOIS: 800 / 424-8802 IT - 5 IEPA PART - 6 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

	or being whole internet my an est	Authorization Number 991 ± 49 I L D O 4 8 9 5 5 9 5 9 13
MILES LABORATORIES	195 W. BIRCH ST.	,
(Company Name)	Address	<u>091,05501908 c</u>
KANKAKEE	IL	14 Generator Number 24
/	WASTE HAULER(S)	
KANKAKEE INDUSTRIAL DISPOSA		S.W.H. Registration Number 0 0 6 6 0 1 2
Hauler Name	Hauler Address	1 L D O 5 4 1 5 5 0 8 0 "
•	, ,	
Hauler Name	Hauler Address	S.W.H. Registration Number 32 38
•	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902
(Facility Name)	Address	9 1 8 0 8 9 0 2
GRIFFITH	IN46319	_ INDO16360265
TO BE COMPLETED BY	State Zip	
	CETONE & CONTAMINATES WA	STE PHASE: LIQUID
		(Liquid, Gaseous, Solid)
enger i de la companya de la company	<del></del>	,
	S MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	Y BELOW:
SHIPPING DESCRIF	PTION: HAZARO CLASS:	WEIGHT FOR THE STATE OF THE STA
	Dominable	WEIGHT FOR 38, 400 LBS TONS (circle one)
		•
·		1 GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	2 CU. YDS. 1
	47 52	53
METHOD OF SHIPMENT (Circle One)		HER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	L WASTE IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND L OF THE DEPARTMENT OF TRANSPORTATION.	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	I INFORMATION	
3/26/21	(Sanda Barley	
DATE: 786/87	(Authorized Signature)	,
WASTE HAULER		
	· .	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPE INDICATED:	ECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	
		12 No. 10 March 1971
(1) (Authorized Signature)	<del>-</del>	DATE: 031 261 81
(Authorized Signature)		DATE:
(2)(Authorized Signature)	· · · · · · · · · · · · · · · · · · ·	unic
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		ZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECI	IAL MASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECI	
It laver	lee	DAI 3 46 81
(Authorized Signature)		60 05
COMMENTS OR SPECIAL INSTRUCTIONS:	0 110 F THEN TO #7 5-11L	7-63 3/2481 Im Murch
		0 101
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*	
DISTRIBUTION: PART - 1 GENERATOR	PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PAR	RT - 5 IEPA PART - 6 GENERATOR

#### TO BE COMPLETED BY **WASTE GENERATOR**

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 - (217) 782-6760

0334077

	SPECIAL WASTE HAULING	MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH	ST.	ILD048955959 <sup>13</sup>
(Company Name)	Address	<del></del>	0910550008 6
KANKAKEE	IL	60901	Generator Number 24
City	State	Zip	
	WASTE HAULER(S)		
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0 0 6 6 0 1 Q
Hauler Name	Hauler Address		25 31
			160054155080
		<del> </del>	S.W.H. Registration Number
Hauler Name	ه A. Hauler Address م		
	DESTINATION — DISPOSAL STORAGE O	R TREATMENT SITE 🔧 🖊	
AMEDICAL CUENTANA CERUTAG			
AMERICAN CHEMICAL SERVICE	COLFAX AVE. Address	SCSOR.R	• <u>91808902</u> 39 Site Number
(Facility Name)		h.C	
GRIFFITH	IN	46319	IND016360265
City	2(8)6	Zip	
TO BE COMPLETED BY WASTE GENERATOR	E C CONTINUATION		;
WASTE NAME: ACE TO	NE & CONTAMINATES	- WAST	E PHASE: LIQUID (Liquid, Gaseous, Solid)
			(Ciquio, Gascous, Solio)
		-	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION IN	DICATED IMMEDIATELY 6	ELOW:
SHIPPING DESCRIPTION:	HAZARD (	CLASS:	/ -
	Salar Sa	_	WEIGHT FOR THE GOOD LBS
	<u> </u>		D.O.J. USE 7, 700 TONS (circle one)
		_	GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE	UANTITY OF WASTE DELIVERED:	3000	2 CU. YOS.
CONVERTED TO CU. YDS. OR GAL	WANTITY OF WASTE DELIVERED	52	53
METHOD OF SHIPMENT (Circle One) DRUM	AS TANK TRUCK OPEN	TRUCK OTHE	P (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS			R (Specify)
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	TOED, MIANNED, AND LAD	teed and is in Proper condition for Transportation,
LUCDODY ACDOL TO AND CONTINUENT ADOLE MONTEN INCODES	TION	1 110	<b>/</b>
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	IION ( )	arber	
DATE: 4/1/8/	JENOIS VI	WW.	•
UNIT. THE STATE OF	(Authorized Signatur	re)	
WASTE HAULER			
1	ક જ ફર્સ ફર		•
I HEREBY CERTIFY THAT THE ABOYE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPTED IN	N PROPER CONDITION F	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:			1/ - 1
			$\mathcal{U}_{1}$
(I) A MM 1/4577119	<del></del>		DATE: 34 / 50
(Authorized Signature)			1
(2) (Authorized Signature)	<del></del>		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		<del> </del>	<del>/</del>
DISPUSAL, STURAGE, ON TREATMENT FACILITY		HAZA	RDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEP	TED AT THE SITE SPECIFI	ED ABOVE:
J. Charles		•	nu 4118/
(Anthorized Signature)	:		UAIL:
		· / 0 0	
COMMENTS OR SPECIAL INSTRUCTIONS: TO	OR \$/1/81 7	-63 919	η
• •	·	0	1
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL AS:	SISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802
			- 5 IEPA PART - 6 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS "62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

	SPECIAL WASTE HAULI	ING MAINIFEST	Authorization Number9 9 1 1 2	4 9
MILES LABORATORIES	195 W. BIF	RCH ST.	JILD0489559	
(Company Name)	Address		0910550008	<u> </u>
KANKAKEE City	State	60901 Zip	14 Generator Number	24
	WASTE HAULEI	R(S)		
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCUST		S.W.H. Registration Number 0 0 6 6 0	10
note: Name	Hadis Address		I L D 0 5 4 1 5 5 0	
Hauler Name	Hauler Address		S.W.H. Registration Number	<del>- 38</del>
	DESTINATION — DISPOSAL STORA	GE OR TREATMENT SITE		
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	& O R.R.	9180890	0 2
(Facility Name) GRIFFITH	Address IN	46319	39 Site Number INDO163602	65
City	State	Zip		0 )
TO BE COMPLETED BY WASTE GENERATOR ACETO	NE & CONTAMINATES		LIQUID	
WASTE NAME:		WAS	CIE PHASE: (Liquid, Gaseous, Solid)	
			•	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFE	ST IS OF THE DOT HAZARD CLASSIFICATIO	N INDICATED IMMEDIATELY	BELOW:	
SHIPPING DESCRIPTION:	HAZ	ARD CLASS:	/ /	
			WEIGHT FOR 74 940 LBS	
	<del></del>			cle one)
	<u> </u>		_	
WEIGHT FOR I.E.P.A. USE MUST BE		3000	1 GALLONS (Circle One)	
CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	$-\frac{3000}{52}$	2 - CU: YDS: 1	
METHOD OF SHIPMENT (Circle One) DRU	MS (TANK TRUCK) O	PEN TRUCK OT	HER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE D	IS PROPERLY CLASSIFIED, DESCRIBED, P	=	* * * * * * * * * * * * * * * * * * *	ION,
	$\sim$	1		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORM.	ATION ().			
DATE: 4/1/81	Jemora Vi	West _	U 000	
	(Authorized Sig	nature)		
WASTE HAULER				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WA	STE AND QUANTITY HAS BEEN ACCEPTI	ED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION	N AS
INDICATED:	•			
(1) That MASTO	<u>)                                    </u>		DATE: 0 4/ 0 1/	8_1
(Authorized Signature)				59
(2) / (Authorized Signature)	<del></del>		DATE	
DISPOSAL, STORAGE, OR TREATMENT FACILITY	<del></del>		······································	
LUCATION OF DATE OF THE ABOUT DESCRIPTION CONTRACT WAST	AND INDICATED QUANTITY HAS DEEN A		ARDOUS WASTE SUBJECT TO FEE YES NO.	<u> </u>
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	. AND INDICATED QUANTITE HAS BEEN AL	COEFIED AT THE SHE SPECI	TIED ABOVE:	01
(Authorized Signature)			DATE:	7-1
COMMENTS OF SPECIAL INSTRUCTIONS: 70 /	10E 4/1/81 -	T-63 900	7	
COMMENTS OR SPECIAL INSTRUCTIONS:		7///		
			` <u> </u>	
IN ILLINOIS: 2177 782-3637	*24 HOUR EMERGENCY AND SPI	LL ASSISTANCE NUMBERS	OUTSIDE ILLINOIS: 800 / 42	24-8892
DISTRIBUTION: PART - LIGENERATOR PAR	I - 2 IEPA PARI - 3 SITE P	ART 4 HAULER PAR	1 - 5 IEPA PART - 6 GENERATOR	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375961

	SI ECIAL WASTE HADEING MAINIFEST	Authorization Number9_1_1_4_9
MILES LABORATORIES	195 W. BIRCH ST.	ILD04895595
(Company Name)  KANKAKEE	Address	0910550008 <sub>G</sub>
City	IL	14 Generator Number 24
VANUAVEE TANJETOTAL DICEOCAL	WASTE HAULER(S)	3
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCUST  Hauler Address	S.W.H. Registration Number 0 0 6 6 0 1
nauer name	Hadiel Address	ILDO 5415508 d
		S.W.H. Registration Number
Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
ALEDT CALL CURLINGS CONTROL		
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R. Address	91808902 39 Site Number 4
(Facility Name)  GRIFFITH	16220	INDO1636026
City	State Zip	
TO BE COMPLETED BY WASTE GENERATOR ACETO	NE & CONTAMINATES	
. WASTE NAME:	NE & CONTAMINATES	WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
	<u> </u>	(-1,,,,,,,,,,
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	ST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIA	ATELY BELOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	
		WEIGHT FOR LBS D.O.T. USE TONS (circle on
		D.O.T. USETONS (circle on
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS, OR GAL.	QUANTITY OF WASTE DELIVERED:	GALLONS Circle One)
CONVENTED TO CO. 103. OR GAL	ZUARTITI OF WASTE DEFICE.	53
METHOD OF SHIPMENT (Circle One) DRUI		OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DI	IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AF EPARTMENT OF TRANSPORTATION.	NO LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA		
11/101	ha cara Rayley	11822
DATE: 4/6/8/	(Authorized Signature)	$\mathcal{K}_{00}$
WASTE HAULER		•
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS, BEEN ACCEPTED IN PROPER CONDIT	TION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
		//, /, 0
(1) XIM 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (	<del></del>	DATE: 54
(Authorized Signature)		DATE:/
(Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY		HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE BOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE S	
Thurs and		DATE: TO S
(Authorized Signature)		60
COMMENTS OR SPECIAL INSTRUCTIONS: 70 1/	10x 4/6/81 T-63	9791
	·	·
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL ASSISTANCE HUME T · 2 IEPA PART · 3 SITE PART · 4 HAULER	BERS* OUTSIDE ILLINOIS 800 / 424 886 PART - 5 IEPA PART - 6 GENERATOR
DISTRIBUTION PART - 1 GENERATOR PAR	1.2 ILIA TANT.3 SILL FART.4 MAULER	TANT - 2 ICLN FART - 0 GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217), 782-6760

0375962

SPECIAL WASTE HAULING MANIFEST **Authorization Number** 195 W. BIRCH ST. 1 L D O 4 8 MILES LABORATORIES 91055 (Company Name) 0 0 8 KANKAKEE 60901 11 City . State -Zip WASTE HAULER(S) 1360 E. LOCUSTA KANKAKEE INDUSTRIAL DISPOSAL S.W.H. Registration Number ILD054155 S.W.H. Registration Number \_\_\_\_\_\_ Hauler Name Haule's Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 1 8 0 8 9 0 Site Number Address (Facility Name) 46319 GRIFFITH IN State TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. . SHIPPING DESCRIPTION: HAZARD CLASS: WEIGHT FOR DOTUSE GALLONS WEIGHT FOR I.E.P.A. USE.MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify). THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION arber) (Authorized Signature) WASTE HAULER ABOYE DESCRIBED SPECIAL WASTE AND QUANTITY HAS SEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND HACKNOWLEDGE THE DESTINATION AS INDICATED (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY £1.00 A HAZARDOUS WASTE SUBJECT TO FEE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTIFY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: '-(Authorized Signature)" COMMENTS OR SPECIAL INSTRUCTIONS IN ILLINOIS: 217 / 782-3637 \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 DISTRIBUTION. PART - 1 GENERATOR PART - 2 IEPA PART 3 SHE PART 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 <u>0</u>375963

	SPECIAL WASTE HAULING	MAINIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRC	H ST.	ILD048955959
(Company Name) <b>KANKAKEE</b>	Address :	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City	e State	Zip	delicition running
KANKAKEE INDUSTRIAL DISPOSAL	WASTE HAULER(S)		
Hauter Name	Hauler Address	<del></del>	S.W.H. Registration Number 25 77 6 6 0 1 2
·		•	ILD05415508(
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAGE O	R TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLEAN AVE		
(Facility Name)	COLFAX AVE &	E O R.R.	91808902 Site Number 4
GRIFFITH	IN	46319	IND01636,026
City	State	Zip	
TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ACETO	ONE & CONTAMINATES	yaw.	TE PHASE: LIQUID
	* ,· <del>·</del>	·	(Liquid, Gascous, Solid)
		-	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIF			BELOW:
SHIPPING DESCRIPTION:	HAZARD	CLASS:	WEIGHT FOR 37230 LBS
The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		WEIGHT FOR SINGLE LBS TONS (circle on
•	101	*	
	—————————————————————————————————————	HE	GALLONS (Dircle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED:	<u> 7000</u>	2 CU. 105. 1
			-
METHOD OF SHIPMENT (Circle One) DR THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WAST			IER (Specify)RFIFE CONDITION FOR TRANSPORTATION
N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE	DEPARTMENT OF TRANSPORTATION.		/
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFOR	MATION	1	NOTY
DATE: 4/16/81	Genoral	arber	
UNIC	(Authorized Signatu	re)	<u>V</u> .
WASTE HAULER			,
LICOPON CENTIFY THAT THE ADONE DESCRIPTO SPECIAL N	IACTE AND MUANTITY WAS DEEN ACCEPTED IN	U DOODED COMMITION	FOR TRANSPORT AND LACKNOWLEDGE THE DESTRIBATION AS
INDICATED:	אסוב אחט קטאויוווו האס סכבית אכלכבובט וו	A PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
R.W. miller	•		nate 4 115181
(Authorized Signature)	<del></del> (	•	UNIC. 34
2) /1/	· · · · · · · · · · · · · · · · · · ·		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY"	The second second		1 1/2
			ARDOUS WASTE SUBJECT TO FEE YES 7
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND INDICATED QUANTITY HAS BEEN ACCEP	TED AT THE SITE SPECIF	IED ABOVE:
(Authorized Signature)			DATE:
<u> </u>	121= 7-163 4/18	101 000	M .
COMMENTS OR SPECIAL INSTRUCTIONS:	1.2/2 1-(43 4/1	<u>-/8)                                    </u>	<u>'</u>
N ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL A	SSISTANCE NUMBERS	OUTSIDE ILLINOIS. 800 / 424 880
DISTRIBUTION. PART LIGENERATOR PA	ART - 2 IEPA PART - 3 SIIE PART	4 HAULER PAR	I - 5 IEPA PART - 6 GENERATOR

DISTRIBUTION: PART - 1 GENERATOR

PART 2 IEPA

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

0375964

"	CHOKCHILL KOAD, SI KIITOHLL	D, ILLII 1013	υz
٠	(217) 782-6760		

	(217) 782-6760	
	SPECIAL WASTE HAULING MANIFEST	Authorization Number 997149
MILES LABORATORIES	= 195 w. BIRCH ST.	ILD048955959
(Company Name) KANKAKEE	Address 60901	0 9 1 0 5 5 0 0 0 8 G
City	State 2 Zip	14 Generator Number 24
KANKAKEE INDUSTRIAL DISPOSAL	WASTE TABLER(S) 1360 E. LOCUST	.W.H. Registration Number 0.066012
Hauler Name	Hauler Address	ILD0354155080
		•
Hauler Name	Hauler Address	S.W.H. Registration Number
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	· .
* AMERICAN CHEMICAL SERVICE	COLFAX AVE. S C & O R.R.	9 1 8 0 8 9 0 2
(Facility Name)	Address	39 Site Number 46
GRIFFITH	IN 46319 State Zip	IND016360265
TO BE COMPLETED BY		
WASTE GENERATOR WASTE NAME: ACETO	NE & CONTAMINATES WASTEP	HASE: LIQUID
:		(Liquid, Gascous, Solid)
THE SPECIAL WASTE REING TRANSPORTED LINDER THIS MANIFFS	ST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BEL	nw-
SHIPPING DESCRIPTION:	HAZARD CLASS:	,
	4/Ammani-	WEIGHT FOR 11500 LBS
	<u> </u>	D.O.T. USE LBS TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE	*5200	GALLONS Circle One)
CONVERTED TO CU. YDS. OR GAL	QUANTITY OF WASTE DELIVERED: 47 5 0 0 52	53
METHOD OF SHIPMENT (Circle One) DRUM	MS CLANK TRUCK OTHER (	Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE I	S PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELE	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE		
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	ITION	(087/
DATE: 4/23/8/	Jenors Darber	(0)
	(Authorized Signature)	, , ,
WASTE HAULER	, ÷	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:	•	1/ -4 81
(1) Shv1/// 187510	翠 一般 (金銭) まりとなっ	DATÉ A LA SE
(Authorized Signature)		37
(2) (Authorized Signature)	<del>-</del>	DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		NIC WASTE SUDIEST TO SEE VES NO .
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED	DUS WASTE SUBJECT TO FEE YES NO
The MANA BOL		DATE 4 1231 81
(Authorized Signatury)	÷	WAIT. 60/
COMMENTS OR SPECIAL INSTRUCTIONS: To 110	072 4/23/81 7-63 979	<b>∼</b>
COMMENTS ON SECOND INSTRUCTIONS.		
IN ILLINOIS. 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802

PART - 3 SITE 1 PART - 4 HAULER

SITE COPY - PART 3

PART 6 GENERATOR

PART - 5 IEPA

TO BE COMPLETED BY

COMMENTS OR SPECIAL INSTRUCTIONS : 4

DISTRIBUTION PART - LIGENERATOR

IN ILLINOIS: 217 / 782-3637

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 0375965

**WASTE GENERATOR** 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST **\* \*** . 生 电表 ILDO4 195 W. BIRCH ST. MILES LABORATORIES Address (Company Name) 0 KANKAKEE IL 60901 City State Zip WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number \_\_\_\_\_\_0\_\_0\_\_6\_\_6\_\_0\_\_1\_\_2 Hauler Name Hauler Address ILD054155080 S.W.H. Registration Number Hauler Address Hauler Name DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. ECEOR.R. 91808902 Site Number (Facility Name) Address GRIFFITH IN 46319 IND016360265 State City TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION: HAZARD CLASS GALLONS Circle One) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 500 E Cu. Too 1 **OUANTITY OF WASTE DELIVERED:** TANK TRUCK - 🏋 🕒 METHOD OF SHIPMENT (Circle One) DRUMS OPEN TRUCK OTHER (Specify). THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN GROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS (Áuthdrized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. I HEREBY CERTIFY THAT THE ABOVE RED SPECIAL WA

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

:PART - 4 HAULER

PART - 5 IEPA

PART - 3 SITE

PART - 2 IEPA

SITE COPY - PART 3

PART - 6 GENERATOR

OUTSIDE ILLINOIS. 800 / 424-8802

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

0375966

	-	Authorization Number 991149
MILES LABORATORIES	JOE W PIDCH CT	(ILD04895595
(Company Name)	195 W. BIRCH ST. Address	
KANKAKEE	IL 60901	0 9 1 0 5 5 0 0 0 8 C
City	State Zip	deserator Number 22
	WASTE HAULER(S)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 Æ. LOCUST	S.W.H. Registration Number 0 0 6 6 0 1 2
Hauler Name- 🗝	Haufer Address	25
	$A^{*}$	1 L 0 0 5 4 1 5 5 0 8
		S.W.H. Registration Number
Hauler Name	Hauler Address	32 38
	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
Augustan armitan agustas		
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O R.R.	9 1 8 0 8 9 0 2 Site Number 44
GRIFFITH		
City	IN 46319	IND01636026
TO BE COMPLETED BY	310.4	
WASTE GENERATOR ACETO	NE & CONTAMINATES WASTE	LICHIO
WASTE NAME:	WASTE	PHASE LIQUID (Liquid, Gascous, Solid)
THE ODERLY WHAT DE WA TRANSPORTED WHITE THE MANUFEST	CT IC OF THE DOT HAZARD OF SECRET CATION INDICATED HAVE DISTINUED	
	ST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BE	LOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	// _
	化化二醇磺胺亚甲烷二甲	WEIGHT FOR 7/1550 LBS TONS (circle ane)
		Torra (arcterney)
WEIGHT 500 + 5 0 + 1105 MIGT DE		1 GALLONS (Circle One)
WEIGHT FOR I.E.P.A. USE MUST BE Converted to Cu. YDS. Or GAL.	QUANTITY OF WASTE DELIVERED: 47 50 00	2 CU. 103: 1
	47 52	53
METHOD OF SHIPMENT (Circle One) DRUI	MS / TANK TRUCK OPEN TRUCK OTHER	(Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE I	IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABE	LED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DI	EPARTMEN OF TRANSPORTATION.	
HEREBY AGREE TO, AND CERTIFY THE ABOVE WRITTEN INFORMA	ATION /	
5/5/0.	( he hadail	(95/
DATE: 9/9/8/	Garbert (Authorized Signature)	
	(Authorized Signature)	7.7.0
WASTE HAULER		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	STE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FO	R TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
CHI SA CA		- 100
(1) - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		DATE: 2 1 4 1 8 2
(Authorized Signature)	- 1 · 34 · 37	54
2) X/1/4/1/4/2019		DATE
(Authorized Signature)		
DISPOSAL, STORAGE, OR TREATMENT FACILITY"	UAZADI	DONG WASTE CUDICOT TO SEE VEC VEC
WEST OF THE POPULATION OF THE	HAZARI AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIE.	DARGUE
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIE	D ABOVE:
	) -	DATE: 3
Anabouring Monthly (1)	· · · · · · · · · · · · · · · · · · ·	au 65
COMMENTS OR SPECIAL INSTRUCTIONS: 70 110	= T-63 5/5/81 979n	
COMMENTS ON SECUND INSTRUCTIONS.		
		<del></del>
IN ILLINOIS. 217 / 782-3637	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802
	I - 2 IEPA PART 3 SITE PART 4 HAULER PART	
The second secon		

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

<u>0375967</u>

	SPECIAL WASTE HAGE	ING MAINIFEST	Authorization Number	
MILES LABORATORIES	195 W. BIRC	H ST.	ILD048955959	
(Company Name)  KANKAKEE	Address IL	60003	0910550008 6	
City	State	60901 Zip	14 Generator Number 24	
VANCET TIMESTER AND DECEMBER	WASTE HAULER			
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUS	<u>T</u>	S.W.H. Registration Number 0 0 6 6 0 1 2	
Hauler Name	Hauler Address		ILD0 <sup>35</sup> 5415508 <sup>3</sup> 0	
·			S.W.H. Registration Number	
Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORA	GE OR TREATMENT SITE	32 38	
AMERICAN CITATON CERTIFOR		_	_	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE &	C & O R R	91808902 Site Number	
GRIFFITH	IN	46319		
City	State		IND016360265	
TO BE COMPLETED BY				
WASTE GENERATOR WASTE NAME: ACETO	WE & CONTAMINATES_	WAS	TE PHASE: LIQUID	
			(Liquid, Gascous, Solid)	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES'	TIC OF THE DOT HAZARD CLASSIFICATIO	MINDICATED MAREDIATELY	PCLOW.	
SHIPPING DESCRIPTION:		ARD CLASS:	BELOW:	
SHIPPING DESCRIPTION:	- TAQ	MU (1422)	WEIGHT FOR // TRS	
		re	WEIGHT FOR USS TONS (circle one)	
	. ,		•	
	<del></del>	···		
WEIGHT FOR I.E.P.A. USE MUST BE		5000	GALLONS (Circle One)	
CONVERTED TO CU. YDS. OR GAL Q	JANTITY OF WASTE DELIVERED:	$-\frac{\mathcal{O}}{\mathcal{O}} \frac{\mathcal{O}}{\mathcal{O}} \frac{\mathcal{O}}{\mathcal{O}}$	53	
METHOD OF SHIPMENT (Circle One) DRUM	S TANK TRUCK 0	PEN TRUCK OTH	ER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS				
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.		SELECTION OF THE REAL PROPERTY.	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	TION /			
Ela la	( king at a	Kuller		
DATE:	(Authorized Sig	natura)	1,77	
	// (Authorized Sig	Darber (	K O C V	
WASTE HAULER				
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPTE	ED IN PROPER CONDITION A	OR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS	
INDICATED:			The second secon	
Ehrl Street			DATE: 51 21 8/259	
(Authorized Signature)			54 59	
(2)	<del></del>		DATE:	
(Authorized Signature)		<del></del>		
DISPOSAL, STORAGE, OR TREATMENT FACILITY		HAZA	ARDOUS WASTE SUBJECT TO FEE YES NO	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	IND INDICATED QUANTITY HAS BEEN AG	CCEPTED AT THE SITE SPECIF	IED ABOVE:	
			DATE:	
(Authorized Signature)	<del>-</del>	·	60 65	
COMMENTS OR SPECIAL INSTRUCTIONS 70 /	x T-63 5/7/81	Im		
COMMENTS OR SPECIAL INSTRUCTIONS: 7.0 770		0		
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPIL	L ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802	
		<del> </del>	- 5 IEPA PART - 6 GENERATOR	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

<u>0375968</u>

	SPECIAL WASTE HAULI	NG MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BÜRC	H ST.	ILD048955959
(Company Name) KANKAKEE	Address,	60901	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
City	' State	Žip	
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	WASTE HAULEF 1360 E. LOCUST Hauler Address	R(S)	S.W.H. Registration Number 0 0 6 6 0 1 2
		. <b>,</b>	I L D O 5 4 1 5 5 0 8 0 S.W.H. Registration Number
Hauter Name	Hauler Address		32 38
	DESTINATION — DISPOSAL STORA	GE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C	SOR.R.	91808902 Site Number
GRIFFITH	IN	46319	_ IND016360265
City	State	Zip	
TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ACET	ONE & CONTAMINATES	w	ASTE PHASE: LIQUID (Liquid, Gascous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES			LY BELOW:
SHIPPING DESCRIPTION:	HAZI	ARD CLASS:	WEIGHT FOR THE AT
	<u> </u>	grett _	WEIGHT FOR 31/200 LBS TONS (circle one)
		•	
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS. OR GAL	UANTITY OF WASTE DELIVERED:	\$500	1 GALLONS (Circle One) 2 CULYOS: 1 53
METHOD OF SHIPMENT (Circle One) DRUM THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CLASSIFIED, DESCRIBED, P		THER (Specify)LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
I HEREBY AGREE TO AND CERTIEY THE ABOVE WRITTEN INFORMAT DATE: 5/12/8/	TION Jensia (Authorized Sig	Barber nature)	
WASTE HAULER	<del></del>	· · · · · · · · · · · · · · · · · · ·	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS INDICATED.	TE AND QUANTITY HAS BEEN ACCEPTE	ED IN PROPER CONDITIO	
(1) Authorized Sensures		4	DATE: 51 121 8/
DISPOSAL; STØRAGE, OR TREATMENT PACILITY*	· ·	<del></del>	
I HEREBY CERTIFY THAT THE ABOVE BESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN AG		AZARDOUS WASTE SUBJECT TO FEE YES NO NO DATE: DATE: 22 22
(Authorized gna see)	= =//0 = :	7 () ()	60 63
COMMENTS OR SPECIAL INSTRUCTIONS: 70 1/0	R 5/12/8) 7-6	3 77/	1
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPIL	L ASSISTANCE NUMBER	OUTSIDE ILLINOIS: 800 / 424-8802
			ART - 5 IEPA PART - 6 GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0375969

	SPECIAL WASTE HAULING MANIFES	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH ST.	ILD048955959
(Company Name)	Address	0910550008 6
KANKAKEE	<u>IL</u> 6090	1 Generator Number 24
City.	State Zip WASTE HAULER(S)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	0.066024
Hauler Name	Hauler Address	S.W.H. Registration Number 0 0 6 6 0 1 1
•		ILD054155080
Hauler Name	Hauler Address	S.W.H. Registration Number
Have Hame	DESTINATION — DISPOSAL STORAGE OR TREATMENT	
	DESTINATION — DISCOSAL STORAGE OR TREATMENT	2115
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVF. & C. & O. R.R. Address	91808902 Site Number
GRIFFITH		9 IND016360265
City	State Zip	
TO BE COMPLETED BY WASTE GENERATOR	Æ & CONTAMINATES	
WASTE NAME:ACE TON	E & CONTAMINATES	WASTE PHASE: LIQUID (Liquid, Gascous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMM	EDIATELY BELOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	•
	FLAMMAZIE	WEIGHT FOR 41, 600 LBS D.O.T. USE 41, 600 TONS (circle one)
· · · · · · · · · · · · · · · · · · ·		D.O.T. USE
·		
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL Q	UANTITY OF WASTE DELIVERED: 47 50 0	2 GLLONS Circle One) 2 CU. YDS: 33
METHOD OF SHIPMENT (Circle One) DRUM	IS (TANK TRUCK) OPEN TRUCK	ATHER (Sec. 4.)
· · · · · · · · · · · · · · · · · · ·	S PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKET	OTHER (Specify)
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION	
5/19/81	( bounds Ruxbe	
DATE: O / 1 / 1 / 1	(Authorized Signature)	
WASTE HAULER		
	•	
I HEREBY CERTIFY THAT THE ABOYE DESCRIPTED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CO.	NDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
IND(CATED:		
(1) AMAN. VIET MILO		DATE: $\frac{1}{54}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$
Authorized Signature		
(2) (Authorized Signature)		DATE: 51 19 81
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		
	AND INDICATED QUANTITY UAS DEEN ACCESSED AV THE	HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WARE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SI	<u>^</u> .
(Authorized Signature)		DATE:
= # a\	-1-1-	lm.
COMMENTS OR SPECIAL INSTRUCTIONS: 70 7 3	57.12 T-63 5/19/81	Y/M
		· · · · · · · · · · · · · · · · · · ·
W W W W W W W W W W W W W W W W W W W	*24 HOUR EMERGENCY AND COUL ACCIOTANCE IN	IMPERE
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NO -2 IEPA PARI - 3 SITE PART - 4 HAULER	JMBERS* OUTSIDE ILLINOIS: 800 / 424 8802 PART - 5 IEPA PART - 6 GENERATOR
Distribution contract activities	The state of the s	

### MPLETED BY W: ناE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 <u>037597</u>0

-		_	Authorization Number 2 2 1 4 9
MILES LABORATORIES	195 W. BI	RCH ST.	(ILD048955959
(Company Name)	Address		<u> 0910550008 6</u>
KANKAKEE	IL State	60901	14 Generator Number 24
City	WASTE HAULEI	Žip P(S)	<del></del>
(ANKAKEE INDUSTRIAL DISPOSAL	1360 FLOCUS	•	0066014
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number 0 0 6 6 0 1 1
	·		4 ILD054155080
	11	<del></del>	S.W.H. Registration Number
Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORA	CE OR TREATMENT SITE	32
AMERICAN CHEMICAL SERVICE	COLFAX AVE. &	C & O R.R.	91808902
(Facility Name) GRIFFITH	Address	11/07/0	39 Site Number 4
City	IN State	46319 Zip	IND016360265
O BE COMPLETED BY	State	Zip	
WASTE GENERATOR WASTE NAME: ACETONE	& CONTAMINATES	2AW	TE PHASE: LIOUID
MASIL NAIL.			(Liquid, Gaseous, Solid)
-		<u>.</u>	
HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST	IS OF THE DOT HAZARD CLASSIFICATION	N INDICATED IMMEDIATELY	BELOW:
SHIPPING DESCRIPTION:	HAZ	ARD CLASS:	•
and the second second		$C_{ij} = C_{ij}$	WEIGHT FOR 39, 680 LBS
	<del></del>		
·	<u>.</u>		:
VEIGHT FOR I.E.P.A. USE MUST BE		(" () 1)	GALLONS Circle One)
CONVERTED TO CU. YDS. OR GAL. QL	JANTITY OF WASTE DELIVERED:	<u> 5000</u>	2 60.705. 1
METHOD OF SHIPMENT (Circle One) DRUM			ER (Specify)
HIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS N ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEF	PROPERLY CLASSIFIED, DESCRIBED, F PARTMENT OF TRANSPORTATION.	ACKAGED, MAKKED, AND LA	BELLED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	ION	.4.	
TEREBI AGREE TO AND CERTIFI THE ABOVE WRITTER IN CRIMAT	···· (	9 111	
DATE: 5/21/8/	MANAY	114DOS	$\mathcal{L}(\mathcal{A})$
	// (Authorized Sig	nature)	<u> </u>
WASTE HAULER			
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND DUANTITY HAS BEEN ACCEPT	EN IN POOPED CONDITION I	CAD TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
NDICATED:	TE AND QUARTITY HAS BEEN ACCEPTED		T. THE TAKEN THE TAKEN ON THE DESTINATION AS
$\circ$			, act act a . L a
(Authorized Signature)	<del></del>	• make the	DATE: ASI 21 E
· · · · · · · · · · · · · · · · · · ·			DATE:
(Authorized Signature)	<del></del>	· 	, vaic.
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	<u> </u>	,,,,	ADDOLO WASTE CHOICES TO THE LIFE
HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED DISANTITY DAG DEEN AS		ARDOUS WASTE SUBJECT TO FEE YES NO
HEREDT THE THAT THE ABOVENUESCHIBED SPECIAL WASTE	אמט ומטוכאזכט עטאמוווו מאט פכנת אי	over len vi int alle aftely	6, 21, SI
(Authorized Signature)			DATE: _ DAL DI_
	7 7/2	<i>)</i>	
COMMENTS OR SPECIAL INSTRUCTIONS:	1 57·11 T-63	5/21/18/	12m
			·
N ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPI		
DISTRIBUTION: PART - 1 GENERATOR PART	- 2 IEPA PART - 3 SITE P	ART - 4 HAULER PART	I - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 0375971

	SPECIAL WASTE HAULING MANIFEST	Authorization Number 9 9 7 1 4 9
MILES LABORATORIES	195 W. BIRCH ST.	ILD048955959
(Company Name)	Address	
KANKAKEE		0 9 1 0 5 5 0 0 0 8 G Generator Number 24
- City	State Zip	
	WASTE HAULER(S)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0 0 6 6 0 1
Hauler Name	Hauler Address	
		I L D O 5 4 1 5 5 0 8 0
Hauler Name	Hauler Address	S.W.H. Registration Number
Tradic Hanic	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	32 30
	•	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	91808902
(Facility Name)	Address	9 1 8 0 8 9 0 2 Sile Number
GRIFFITH	IN46319	— INDO16360265
City	State Zip	
TO BE COMPLETED BY WASTE GENERATOR		
WASTE NAME: ACETONE	& CONTAMINATES W	/ASTE PHASE: LIQUID (Liquid, Gascous, Solid)
		(cidnia' gazconz' 2011a)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATE	LY BELOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	/,
	FLAMMARIE	WEIGHT FOR 41,600 LBS TONS (circle one)
	1	i tons (circle one)
., , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	•
WEIGHT FOR I.E.P.A. USE MUST BE		1 GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL Q	UANTITY OF WASTE DELIVERED: 00 50 00 00	2 69: 199
	•/	33
METHOD OF SHIPMENT (Circle One) DRUM	}	OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CL <del>ASSIFIED, DES</del> CRIBED, PACKAGED, MARKED, AND PARTMENT OF TRANSPORTATION	LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
	$\wedge$	•
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	TION / /	
NY 6/1/8/	( January Darber	( 1180>
DATE:	(Authorized Signature)	UCC
WASTE HAULER		
1 / /		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	7 TE AND QUANTITY HAS BEEN ACCEPTED IN PROBER CONDITIO	N FOR TRANSPORT AND LACKNOWLEDGE THE DESTINATION AS
IND CATED:	r y	
Chuld Mest		DATE: $\frac{5}{54}$ $\frac{29}{59}$
(1) Mauthorized Signaturity	<del>_</del>	DATE. 54 2 2 7 59
and What to Miles		DATE. 34 1 8/3
(Authorized Signature)	<del></del>	
DISPOSAL, TORAGE, OR TREATMENT FACILITY		131000000000000000000000000000000000000
A DESCRIPTION AND ADDITION OF COLORS COLORS		AZARDOUS WASTE SUBJECT TO FEE YES NO NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPE	/ , /, <del>\frac{\fir}{\fin}}}}}}}}}{\frac{\fir}}}}}}}{\frac{\fir}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}</del>
		DATE:
(Auylopeu agratule)	<u> </u>	
COMMENTS OR SPECIAL INSTRUCTIONS: 70	=75TILL 6/1/8/17-6	3 97m.
		0 -,
IN ILLINOIS: 217 / 782-3637	• 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER	OUTSIDE ILLINOIS: 800 / 424 8802
		ART + 5 IEPA PART - 6 GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
( (217) 782-6760
SPECIAL WASTE HAULING MANIFEST

	3		Authorization Number	<u> </u>	
MILES LABORATORIES	195 W. BIRC	H ST	ILD0489559		
(Company Name)	Address		· _		
KANKAKEE	<u> </u>	60901	0 9 1 0 5 F Generator N	umber 24	
City	State	Zip			
WARRANCE TRENCTOTAL DICTORAL	WASTE HAUL	` '			
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOC Hauler Address	UST	S.W.H. Registration Number	066013	
namer name	Hanisi wadisa		• • • •	•	
		•	ILD 0 5 4	155080	
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number	<del></del>	
	DESTINATION — DISPOSAL STOR	RAGE OR TREATMENT SITE	<del></del>		
AMERICAN CHEMICAL SERVICE	COLFAX AVE. &	C & O R.R.	9.1	808002	
(Facility Name)	Address		39	808902 ite Number 4	
GRIFFITH	IN	46319	IND016	360265	
City	State	Zip			
TO BE COMPLETED BY WASTE GENERATOR ACETONIE			,		
WASTE NAME: ACE TONE	& CONTAMINATES	WASTE	PHASELIQU		
	Ē		(Liquida Gaseous	Solid) 1 F	
<del></del>	<del></del> ····	<del></del>	• • • • • • • • • • • • • • • • • • • •		
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICAT	TION INDICATED IMMEDIATELY BE	.LOW:		
SHIPPING DESCRIPTION:	HA	VZARO CLASS:	. /.		
	HAMM	Ale:	WEIGHT FOR 41, 600	LBS	
		,	0.0.1.038	TONS (circle one)	
WEIGHT CODIC DIA HEE MHET DE			GALLONS (Circle One)		
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QI	UANTITY OF WASTE DELIVERED:	05000	2 CU. 10S. 1		
. METHOD OF SHIPMENT (Circle One) DRUM			(Specify)	· · · · · · · · · · · · · · · · · · ·	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CLASSIFIED, DESCRIBED,	, PACKAGED, MARKED, AND LABE	LED AND IS IN PROPER CONDITION FO	R TRANSPORTATION,	
		•			
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMAT	IION /				
nur h/11/81	Commax	Darber 11	100-1		
DATE: ST. TO ST.	, (Authorized S	Signature)	UU <b>Y</b>		
WASTE HAULER					
4				•	
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WAS	TE AND QUANTITY HAS BEEN ACCEP	TED IN PROPER CONDITION FO	R TRANSPORT AND I ACKNOWLEDGE T	HE DESTINATION AS	
INDICATED:		,		,	
That I land		_	DATE:	11/1/8/	
(1) (Authorized Signature)	<del>_</del> · ·		. DATE:	3 + 11 U/5	
		•	DATE:	1 1 1	
(2) / (Authorized Signature)			DATE.		
DISPOSAL, STORAGE, OR TREATMENT FACILITY*					
	AND INDIGNACO OHANTITA HAG BEEN		DOUS WASTE SUBJECT TO FEE YES_		
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE.	AND INDICATED QUANTITY HAS BEEN	ACCEPTED AT THE SHE SPECIFIE	D ABOVE:	11.51	
	Summer of the second		DATE:	7 TT OF	
(Authorized Signature)		7	ev	, 63	
COMMENTS OR SPECIAL INSTRUCTIONS: 73	7 5 TILL 6	6/1/8) 7-6	3 91m		
· ·		7			
		· · · · · · · · · · · · · · · · · · ·			
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SP	PILL ASSISTANCE NUMBERS*	JI 30I2TUO	LINOIS: 800 / 424-8802	
	2 IEPA PART 3 SITE	PART 4 HAULER PART	5 IEPA PART - 6 GENERATOR		

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

	SPECIAL WASTE HAULING	G MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH 5	T	110048955959
MILES LABORATORIES (Company Name)	Address		0910550008
KANKAKEE	State	60901	14 Generator Number 24
City	WASTE HAULER(S	Zip S)	<del></del>
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUS		SWU Posistentias Number 0.066073
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number 0.0.6.6.0.1.2
•			I L D O 5 4 1 5 5 0 8 0
Hauler Name	Hauler Address	· · · · · · · · · · · · · · · · · · ·	S.W.H. Registration Number
	DESŢINATION — DISPOSAL STORAGE	OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE & C	SOR.R.	91808902 Site Number
GRIFFITH	IN .	46319	IND016360265
City	State	Zip	1,15010300209
TO BE COMPLETED BY		11.70	
WASTE GENERATOR WASTE NAME: ACETO	THE & CONTAMINATES	v	ASTE PHASE: LIQUID
•			(Liquid, Gascous, Solid)
THE COLORA WARE DEING TOANGROOTED HADED THIS MANIETET	IC OF THE DOT HAZADD OF ACCIDICATION		TV DELOW.
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST SHIPPING DESCRIPTION:		INDICATED IMMEDIATE D CLASS:	ELT BELOW:
SHIPPING DESCRIPTION.	T	1/6	WEIGHT FOR // LBS
·		we	D.O.T. USETONS (circle one
			(1 GALLONS (Eircle One)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QU	ANTITY OF WASTE DELIVERED:	5000	2 00:103:
(0	47	52	33
METHOD OF SHIPMENT (Circle One) DRUMS	TANK TRUCK OPE	N TRUCK	OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEP	PROPERLY CLASSIFIED, DESCRIBED, PAC	CKAGED, MARKED, AND	LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
	<i>(</i> 1)	7	•
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATI	ON ()		·
DATE: 6/4/81	SIMMIA DI	W.	4807
	// (Authorized Signal	ture)	UUUS
WASTE HAULER			
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SECIAL WAST	T AND QUANTITY HAS DEEN ASSEDTED	IN DOODED CONDITIO	NA FOR TOANCRORY AND A ACCURAGE TORS THE DESTRUCTION AS
INDICATED:	E MAD QUANTITI HAS BEEN ACCEPTED	IN PROPER CONDITIO	IN FOR TRANSPORT AND T ACKNOWLEDGE THE DESTINATION AS
Thut Make			DATE: 601 4-1 8/
(1) Authorized Signature	<del>-</del> .		DATE: SAC 1 Q-
(2)			DATE: /
(Authorized Signature)		· ·	
DISPOSAL, STORAGE, OR TREATMENT FACILITY	<i>i</i>	- · · · · · · · · · · · · · · · · · · ·	HAZARDOUS WASTE SUBJECT TO FEE YES
I HEREBY CERTIFY THAT THE ALOVE DESCRIBED SPECIAL WAS BA	NO INDICATED QUANTITY HAS BEEN ACCE		<b>\</b>
The sale Land			
(Authorized Sgnitter			UAIL: 60
	#1 ~ -	T-63 A	1/4/21 0000
COMMENTS OR SPECIAL INSTRUCTIONS:	7 57122	1-6-5 4	11/01 71/08
<b>V</b> .	·		
IN ILLINOIS, 217 / 792 2627	*24 HOUR EMERGENCY AND SPILL	ACCICTANCE HIMBE	RS* OUTSIDE ILLINOIS: 800 / 424 880
IN ILLINOIS: 217 / 782-3637			ADT 5 ICDA PART 6 CENEDATOD

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - L GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

0375975

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST Authorization Number \_ MILES LABORATORIES 195 W. BIRCH ST. ILD04895 (Company Name) Address 91055000 KANKAKEE IL 60901 State Zip WASTE HAULER(S) S.W.H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 2 KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST Hauler Name Hauler Address ILD054155080 S.W.H. Registration Number Hauler Address Hauler Name DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE 91808902 39 Site Number 44 IND016360265 COLFAX AVE. & C & O R.R. (Facility Name) Address GRIFFITH IN 46319 City State TO BE COMPLETED BY **WASTE GENERATOR** ACETONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: HAZARD CLASS: FLAMMABLE TONS (circle one) WEIGHT FOR LE.P.A. USE MUST BE CONVERTED TO CU: YDS: OF GAL: :: QUANTITY OF WASTE DELIVERED: JANK TRUCK METHOD OF SHIPMENT (Circle One) DRUMS TOPEN TRUCK OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CENTIFY THE ABOVE WRITTEN INFORMATION Barber 4000 **WASTE HAULER** I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 06/ 17/ 8/ (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. 6 17 81 (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS:

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 3 SITE

PART - 2 IEPA

PART - 4 HAULER

PART - 5 IEPA

SITE COPY - PART 3

PART - 6 GENERATOR

OUTSIDE ILLINOIS: 800 / 424-8802



ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

	SPECIAL WASTE HAULI		Authorization Number 997149		
	305		I L D 0 4 8 9 5 5 9 5 5 9		
MILES LABORATORIES (Company Name)	195 W. B	IRCH ST.		== 0 0 0	
KANKAKEE	IL	60901		erator Number G	
City	State	Zip			
MANUALTH TARREST TALL DECROCAL	WASTE HAULEI 1360 E. LOCUST	R(S)		0066033	
KANKAKEE INDUSTRIAL DISPOSAL Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number	0066012	
			ILDO	54155080	
	0-1-44	<del> </del>	S.W.H. Registration Number	<del>-</del> <del></del> <del></del>	
Hauler Name	Hauler Address  DESTINATION — DISPOSAL STORA	CE OD TOUTHER CITE	,	38	
	DESTINATION — DISPUSAL STORA	OF OR INTENIMENT 211F			
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	& O R.R.		9 1 8 0 8 9 0 2 Site Number 40	
(Facility Name)	Address	h.c		• • • • • • • • • • • • • • • • • • • •	
GRIFFITH	IN State	46319 Zip	_ INDO	16360265	
TO BE COMPLETED BY					
WARE ARMED ATED	E & CONTAMINATES	w	ASTE PHASE:	LIQUID	
		•	· (Liquid,	Gaseous, Solid)	
· · · · · · · · · · · · · · · · · · ·		<del></del>			
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES			LY BELOW:	•	
SHIPPING DESCRIPTION:	HAZ	ARD CLASS:	-WEIGHT FOR	1 DC	
	FLAV	MABLE	D.O.T. USE	LBS TONS (circle one)	
	•		,t		
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS. OR GAL. Q	UANTITY OF WASTE DELIVERED:	05000	1 GALLONS (Circle O 2 CU YDS. 1	ine)	
METHOD OF SHIPMENT (Circle One) DRUM THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	S PROPERLY CLASSIFIED, DESCRIBED, I		THER (Specify) LABELED AND IS IN PROPER CONDIT	IION FOR TRANSPORTATION,	
I HEREBY AGREE TO, AND CERTIFY THE ABOVE WRITTEN INFORMA	TION / /	1		•	
6/22/81	(kanara)	BUHLERI	4004		
DAIL: -/ S. J. J. J.	(Authorized Sig	nature)	4007		
WASTE HAULER					
1 HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WAS INDICATED:	HE AND QUANTITY HAS BEEN ACCEPT	ED IN PROPER CONDITION	N FOR TRANSPORT AND I ACKNOWL	EDGE THE DESTINATION AS	
Corn - Kill			0.476	6 22 81	
(Authorized Signature)		-	DATE	22 0 1	
(2)	<u> </u>		DATE	:	
(Authorized Signature)		<del></del>		<del></del>	
DISPOSAL, STORAGE, OR TREATMENT FACILITY			AZARDOUS WASTE SUBJECT TO FEE	YESNO	
HEREBY CERTIFY HAT THE ABOVE DESCRIBED SPECIAL WASTE  (Authorized Stradure)	AND INDICATED QUANTITY HAS BEEN AI	CCEPTED AT THE SITE SPEC	OF IED ABOVE:	<u>[-</u> , <u>-</u> 27-8]	
/ = 2	571. 1/2./4	T / 7: 000			
COMMENTS OR SPECIAL INSTRUCTIONS: 70	STILL 6/23/81	1-67 X19m	·		
		<u> </u>		<del></del>	
IN ILLINOIS: 217 / 782-3637	*24 HOUR EMERGENCY AND SPI	L ASSISTANCE NUMBER	\$* Au	CIDE ILLINOIS: 000 / 424 0002	
			ART 5 IEPA PART 6 GENERA	SIDE ILLINOIS: 800 / 424-8802 TOR	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

	SPECIAL WASTE HAULING MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH ST.	11004895595
(Company Name)	Address	0910550008 6
KANKAKEE City	IL m60901 in	4 Generator Number 24
	WASTE HAULER(S)	
KANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	S.W.H. Registration Number 0 0 6 6 0 1 £
Hauter Name	Hauler Address	160054155080
·		S.W.H. Registration Number
Hauler Name	Hauler Address	32 38
<del></del>	DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O R.R.	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(Facility Name)	Address	
GRIFFITH	IN 46319	- INDO16360269
City •	State Zip	
TO BE COMPLETED BY WASTE NAME: ACETONE	E & CONTAMINATES	STE PHASE: LIQUID
WASTE HAME.		(Liquid, Gascous, Solid)
		·
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFES	T IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY	Y BELOW:
SHIPPING DESCRIPTION:	HAZARD CLASS:	1/1. 1/22
	FLAMMABLE	WEIGHT FOR 40, 420 BS
		_
WEIGHT FOR I.E.P.A. USE MUST BE	005000	2 CU. YDS.
CONVERTED TO CU. YDS. OR GAL	DUANTITY OF WASTE DELIVERED: 47 52	53
. METHOD OF SHIPMENT (Circle One) DRUM		HER (Specify)
	S PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LA	ABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DE	PARTMENT OF TRANSPORTATION.	/
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMA	TION	10007
DATE 6 129 181	Jenora Durber	1000
	(Authorized Signature)	( y o
WASTE HAULER		
I HEDERA CEDITION THAT THE ADONE DESCRIPTO COLCIAL MAS	STE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACCURATION FOR THE DESTRUCTION AS
INDICATED!	TE AND QUARTITY HAS BEEN ACCEPTED IN PROPER CONDITION	TOR TRANSPORT AND TACKNOWLEDGE THE DESTINATION AS
m Kieland Mill	en.	w/ 129181
(Authorized Signature)	<del></del> ;	UAIL 54
(2)		DATE:
(Authorized Signature)	<u> </u>	
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	HAZ	PARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIPED SPECIAL WASTE	AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECI	FIED ABOVE:
		DATE:
(Authorized Signature)	The first of the second of the	A.S.
COMMENTS OR SPECIAL INSTRUCTIONS:	#7 5514 T-63 6/29/81 G	m
·		1
IN ILLINOIS: 217 / 782-3637  DISTRIBUTION: PART - 1 GENERATOR PART	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS 1 2 IEPA PART 3 SITE PART 4 HAULER PAR	·
DISTRIBUTION CART LUCINERATUR PART	, z nem two t-a sut Maki-4 HAUIFR MAK	T - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

MILES LABORATORIES

KANKAKEE

KANKAKEE INDUSTRIAL

TO BE COMPLETED BY WASTE GENERATOR

WEIGHT FOR I.E.P.A. USE MUST BE

CONVERTED TO CU. YDS. OR GAL.

WASTE HAULER

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(Company Name) ,

City

Hauler Name

Hauler Name

AMERICAN CHEMICAL SERVICE

(Facility Name) GRIFFITH

City

METHOD OF SHIPMENT (Circle One)

(Authorized Signature)

70

PART - 2 IEPA

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 4 HAULER

PART - 5 IEPA

PART - 3 SITE

DISPOSAL, STORAGE, OR TREATMENT FACILITY

COMMENTS OR SPECIAL INSTRUCTIONS:

DISTRIBUTION. PART - L GENERATOR

IN ILLINOIS. 217 / 782-3637

(Authorized Signature)

SHIPPING DESCRIPTION

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 0375978

(217) 782-6760 SPECIAL WASTE HAULING MANIFEST Authorization Number 997149 195 W. BIRCH ST. ILD04895595 Address 60901 WASTE HAULER(SY S.W.H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 1360 E. LOCUST Hauler Address ILD054155080 S.W.H. Registration Number Hauler Address DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE COLFAX AVE. & C & O R.R. 9 1 8 0 8 9 0 2 Site Number IN 46319 IND016360265 State Zip WASTE NAME: Y ACETONE & CONTAMINATES LIOUID WASTE PHASE: (Liquid, Gascous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: WEIGHT FOR 39, 230BS D.O.T. USE 300NS (circle one) GALLONS Circle One) **QUANTITY OF WASTE DELIVERED:** TANK TRUCK DRUMS OPEN TRUCK . OTHER (Specify). THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Barber 11007 (Authorized Signature) THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS DATE: 07/ 06/ 8/ HAZARDOUS WASTE SUBJECT TO FEE AL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

SITE COPY - PART 3

PART - 6 GENERATOR

OUTSIDE ILLINOIS: 800 / 424-8802

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468798

Authorization Number

MILES LABORATORIES	195 w. BI		8 1 5 9 3 7 8 2		550008 6
(Company Name)	Addre IL	60901	Profit Number		enerator Number 24 0 4 8 9 5 5 9 5 3
City	State	Zip			7 4 0 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
		<del> </del>	IAULER(S)		
	3060 - 40	,			
KAKEE INDUSTRIAL DISPOS Hauler Name	Hauler Address	CUST	2.2	S W.H. Registration Number	<u>0 0 6-6 0 1</u>
		78.1	5 9 3 3 2 9 3 1 Phone Number		1.5.4.1.5.5.0.8. EPA Number
Hauler Name	Hauler Address	<del></del>	<b>1</b>	S.W.H. Registration Number	32 3
•		.j		<del></del>	
	DESTINA	IION DISPOSAL S	Phone Number  TORAGE OR TREATMENT SITE		EPA Number
MERICAN CHEMICAL SERVIC		i i		39	9 1 8 0 8 9 0 2
GRIFFITH	IN	46	<u>319 2 1 9 9 2 4 1</u>	4 <u>3 7 0 I N D</u>	0 1 6 3 6 0 2 6
City	State	*	Zip / Phone Numbe	ır, ·	EPA Number
Alternate (Facility Name)	<del></del>	Address	$=$ $\neq_i$	39	Site Number
		<u> </u>	<u> </u>		·
City	State	- 1	Zip Phone Numbe	·r	EPA Number
O BE COMPLETED BY ASTE GENERATOR WASTE NAME:	ACETONE & C	ONTAMINATE	S WASTE	DUACE 1	IQUID · -
TE SPECIAL WASTE BEING TRANSPORTED UNDE SHIPPING DESCRIPTION:	R THIS MANIFEST IS OF THE D : HAZARD CLASS:	OT HAZARD CLASEII	,	SCLUTT.	d. Gaseous, Solid)
WASTE ACETONE	FLAMMABLE	LIQUID	UN OF NA Number	EPA HW N	imber
EIGHT FOR 24, 300 TONS (circle	WEIGHT FOR I.E.P.J	A. USE MUST BE YDS. OR GAL.	DUANTITY OF WASTE DELIVERED:	03000 52	1 GALLONS (Circle One)
METHOD OF SHIPMENT (Circle One)	(DRUMS)	TANK TRUCK	OPEN TRUCK OTHER (Specify	·)	
HIS IS TO CERTIFY THAT THE ABOVE NAMED W I ACCORDANCE WITH THE APPLICABLE REGULA	ASTE ARE PROPERLY CLASSIFI	ED DESORIBED, PAC IMENI OF TRANSPO	CKAGED. MARKED. AND LABELED AN	D IS IN PROPER CONDITION F	OR TRANSPORTATION
HEREBY AGREE TO AND CERTIFY THE ABOVE W		Jeno	ia Durbu	DATE:	1/15/81
		1	(Authorized Signature)		
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The Wholes			<i>i</i> 7	Natie	21/51 81
(Authory and Signature)			Ť,	DATE	54
(Authorized Signature)		_/	<i>I</i> ,	DATE	
SPUSAL STORAGE. OR TREATMENT FACILITY		<u> </u>			<del></del>
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(Autyuriz (d. Syficiture)			<del>-</del> -77 ) <u>-</u>	DATE	
GUANTINE OR EDECIAL INCTOLICATIONS	To #7	STILL	7/15/81 .7-6	3 On 9M	·
SIMMENTS OR SPECIAL INSTRUCTIONS		~/· LL	1.5/0/ 1-10	<del>3/11/1</del>	,
			··· \		
ILLINOIS 217 / 782-3637	. *24 HOUR	EMERGENCY AND S	PILL ASSISTANCE NUMBERS*	· OUTSIDE ILLINOIS	800 / 424-8802 or 20? / 426-26
ISTRIBUTION: PART - 1 GENERATOR PAR	RT - 2 IEPA - PART - 3 SITI	PART - 4 H	AULER: - PART : 5 IEPA	PART 6 - GENERATOR	

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

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ulhorization Number 997149

	SPECIA	IL WASIE H	AULING MAINIF	£51	,	Ü	
MILES LABORATORIES	195 W. BIRCH	ST.	8159			055000	8 <sub>G</sub>
(Company Name)	Address	60007	Phon	e Number		Generator Number	?4 - 0 - 0
KANKAKEE	IL -	60901		· _		048955	<u> </u>
City	State	Zip	HAULER(S)	<del></del>	···········	EPA Number	<del></del>
	_		naucen(3)	•		1	_
ANKAKEE, INDUSTRIAL DISPOSAL	1360 E. LOCU	ST ·		S W.H	H. Registration Numbi	0066	012
Hauler Name	Hauler Address	Ω.				25	'A 9 A
and the second second	200		Phone Number	2 9 3 <u>1</u>	1 6 0	0 5 4 1 5 5 EPA Number	<u> </u>
	•		17 3		H Registration Numb		
Hauler Name	Hauler Address	<del></del>	<b>9</b> 1	3.11.	negistration water	32 '(	38
	•	·. —					
	DESTINATION	- DISPOSAL	Phone Numb		· · · · · · · · · · · · · · · · · · ·	EPA Number	
AMERICAN CHEMICAL SERVICE	COLFAX AVE.			icar one		9 1 8 0 8	902
(Facility Name)	Addr		7		39	9 1 8 0 8 Sile Number	2 2 46
GRIFFITH	IN		6319 2 1	9 9 2 4 4 3	70 INI	01636	026
City	State	<u> </u>	Zıp	Phone Number		EPA Number	
						- <del> </del>	
Alternate (Facility Name)	Addre	ess			. 39	Site Number	46
City	State	<del>-</del>	Zip	Phone Number		EPA Number	<del></del>
TO BE COMPLETED BY	• :					<del></del>	
WASTE GENERATOR WASTE NAME:A	CETONE & CONTA	MINATES	خرد ٠	WASTE PHASE	• *	LIQUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE	T .	IAZARD CLASS	IFIÇATION_INDIÇATED	IMMEDIATELY BELOW	(Liq	uid, Gaseous, Solid)	
SHIPPING DESCRIPTION:	HAZARD CLASS:	1	tr Ki	3 0 0 0		0.00	
WASTE ACETONE	FLAMMABLE LI	QUID	UN OF NA	1 0 9 0 Number	EPA HW	0 0 2 Number	•
	· · · · · · · · · · · · · · · · · · ·					CALLONS	Cuelo On 3
WEIGHT FOR 37, 720 LBS TONS (circle one)	WEIGHT FOR I.E.P.A. US CONVERTED TO CU. YOS		QUANTITY OF WASTI	E DELIVERED: 20	5000	2 CU 70S.	(Circle One) <b>1</b>
<u> </u>					-	•	53
METHOD OF SHIPMENT (Circle One) (DRI	Number TAN	K TRUCK	OPEN TRUCK	OTHER (Specify)	<del></del>	<del></del>	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE	ARE PROPERLY CLASSIFIED.	DESCHIBED, PA	CKĄGED. MARKED	AND LABELED AND IS IN	PROPER CONDITION	FOR TRANSPORTATION.	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPARTMEN	NT OF TRANSP	ORTATION AND I	årler	ζ.	8/3/81	
! HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION S	<i>yerri</i>	(Authorized Signa		_ DATE.	9/3/01	
WASTE HAULER		,	<u> </u>				
THE DESTINATION AS INDI	HE ABOVE-DESCRIBED WASTE CATED:	E AND QUANTIT	Y HAS BEEN ACCEPT	ED IN PROPER CONDITION	ON FOR TRANSPORT	AND I ACKNOWLEDGE	
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(1) felhurd Mill	es_			en grande en	of DAT	<u>: 08/03</u> /	02/
(Authorized Signature)	i, i	٠.				54 / /	. 54
(Authorized Signature)					DAT	E	-
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				<del></del>	<del></del>		<del></del>
<del></del>	TE AND INDICATED DIVANTITY		CEDICO AT THE CITE		STE SUBJECT 10 FE	E YES	NG X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WAS	TE AND INDICATED COARTITY	HAS BEEN AU		SPECIFIED ABOVE		813	1 52
(Julgory Spagalus)	<del></del>			_	DA	" <i></i>	/` <b>_&amp;/</b> _5
- FUNCTION OF		210 -		0/2/21	<u></u>		
COMMENTS OR SPECIAL INSTRUCTIONS.	70	1107	<u> </u>	8/3/81	97 <b>.7</b> /		
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IN HILIMOIS 217 / 782.3627	*24 HOUR EM	ERGENCY AND	SPILL ASSISTANCE N	NUMBERS.	OUTCIDE HEREO	C. 200 / 42/ 2002	00 / 100 0000
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 2		PART - 4 F			GENERATOR	S: 800 / 424-8802 or 20	U2 / 426-2675

TO BE COMPLETED BY WASTE GENERATOR

0468800 Authorization Number

MILES LABORATORIÉS	195 W. BIR			0 0910	<u> 550008                                </u>
(Company Name)  KANKAKEE	Addre IL	60901	Phone Number	ILD	1.0 4 8 9 5 5 9 5 9 5 9 5 9 5 9 5 9 5 9 5 9 5
City	State	Zip			A Number
		WASTE HAULER(S)			
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LO	CUST	÷. s	.W.H. Registration Number	0066012
			3 2 9 3 1 Number	ILDO	5 4 1 5 5 0 8 0 EPA Number
Hauler Name	Hauler Address	• • • • • • • • • • • • • • • • • • • •	s	.W.H. Registration Number	32 38
·		Phon	ne Number		EPA Number
	DESTINA	TION — DISPOSAL STORAGE OR	TREATMENT SITE		
AMERICAN CHEMICAL SERVICE (Facility Name)		Address	·	39	3 1 8 0 8 9 0 2 Sile Number 46
GRIFFITH City	State		2 1 9 9 2 4 4 Phone Number	370 IND	0 1 6 3 6 0 2 6 EPA Number
Alternate (Facility Name)		Address	*	39	Site Number 40
City	State	Zipt *	Phone Number		EPA Number
TO BE COMPLETED BY WASTE GENERATOR		¥ V			
WASTE NAME:A	ETONE & CON		WASTE PH	et =	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS		OT HAZARD CLASSIFICATION IN	DICATED IMMEDIATELY BELI	OW (Liquid	d. Gaseous, Solid)
SHIPPING DESCRIPTION.	HAZARD CLASS		JN 1 0 9 0	υo	0.2
WASTE ACETONE	FLAMMABLE		N or NA Number	EPA HW Nu	
WEIGHT FOR 3 7, 740 CBS TONS (circle one)	WEIGHT FOR I.E P CONVERTED TO CU	A. USE MUST BE OUANTITY OF	F WASTE DELIVERED: 47	0500.0	
METHOD OF SHIPMENT (Circle One) (DRU	MS)	TANK TRUCK OPEN TRUC	CK OTHER (Specify)		53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A	ARE PROPERLY CLASSIFI	ED, DESCRIBED, PACKAGED, MA	RKED AND LABELED AND IS	S IN PROPER CONDITION FO	R TRANSPORTATION
1 HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN		Jenora:	Barbar (Signature)	DATE: _	8/10/81
WASTE HAULER  1 HEREBY CERTIFY THAT TO THE DESTINATION AS INDIC	HE ABOVE-DESCRIBED W	ASTE AND QUANTITY HAS BEEN	ACCEPTED IN PROPER CONE	DITION FOR TRANSPORT AN	D I ACKNOWLEDGE
D. C. ham					68/10/61
(Authorized Signature)	<del></del>			DATE:	\$8/10/ & f
(Authorized Signature)		į		DATE:	
DISPOSAL. STORAGE, OR TREATMENT FACILITY*		ė,	HAZARDOUS	WASTE SUBJECT TO FEE	YES_ NG
I HEREBY CERTIFY THAT THE ABOVE TO SCIPLED WAS	E AND INDICATED OUAT	ITHY HAS BEEN ACCEPTED AT T		DATE	3. 10/51
(Authorized Signa / e)  COMMENTS OR SPECIAL INSTRUCTIONS	100	571LL J-63	8/19/81 20	n	05
COMMENTS OF SPECIAL INSTRUCTIONS		, 6,		<b>'</b>	,
IN ILLINOIS, 217 / 782-3637	*24 HOUF	REMERGENCY AND SPILL ASSIST	TANCE NUMBERS	OUTCOS AL MOSS	000 4 404 0000 4 500 4 500
DISTRIBUTION PART - 1 GENERATOR PART - 21				OUTSIDE ILLINOIS	800 / 424 8802 or 20? / 426 267

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0468802

outhorization Number 997149

City   State   Zip   EPA Number   SW.H. Registration Number   DO 0 6 6 0 1 2   SW.H. Registration Number   SW.H.		SPEC	CIAL WASTE HA	ULING MANIFEST		8
Column   C	MILES LABORATORIES	195 W. BIRG	ж st.	8159378	270	0910550008 <sub>6</sub>
NACAKEE INDUSTRIAL DISPOSAL   1360 E. LOCUST				Phone Number	14	
AMERICAN CHEMICAL SERVICE  (COLFAX AVE. & C. & O. R.A.)  ANDRESS  AND ASSET RAME  ACTION & COLFAX AVE. & C. & O. R.A.  ACTION & SAME  ACTION & COLFAX AVE. & C. & O. R.A.  ANDRESS  COLFAX AVE. & C.	City	State	Zip			EPA Number
B 1 5 9 3 3 2 9 3 1  There humber  Rader Name  Rader Name  Rader Name  Rader Address  Rader Name  Rade			WASTE HA	ULER(S)	· ·	
Rauder Name  Raude	ANKAKEE INDUSTRIAL DISPOS		CUST		S W H. Rec	instration Number 0 0 6 6 0 1 2
PROME NUMBER    PROME NUMBER   PROME NUMBER   PROME NUMBER	Hauler Name	Hauler Address	0 -		4	25
Plante Number  DESTINATION —, OSPOSAL STORAGE OR REALMENT SITE  AMERICAN CHEMICAL SERVICE (Vacing Name)  DESTINATION —, OSPOSAL STORAGE OR REALMENT SITE  AMERICAN CHEMICAL SERVICE (Vacing Name)  AMORIES  GRIFFITH  IN  16319  AMORIES  AMO			81	5 9 3 3 2 9 3 Phone Number	<u>1</u>	
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DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE  (Facility Name)  GRIFFITH  IN  AGOINSS  AGO	Haniéi Maine	natier Audiess				J. J.
ADDITION CHEMICAL SERVICE COLFAX AVE. & C & O R.R.  (Facing Name)  GRIFFITH  IN  46319 2 1 9 9 4 4 3 7 0 IN D 0 16 3 6 0 2 6  FA Number  Alternate (Facing Name)  Address  79 Size Number  City  State  Zo  Phone Number  TO BE COMPLETED BY  WASTE ENAMATION  WASTE ENAMATION  HE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANUFEST IS OF THE DOT HAZARD CLASS FICATION INDICATED IMMEDIATELY BELOW:  WASTE ENAMATION  HAZARD CLASS  WASTE ACETONE  FLAMMBLE LIQUID  UN O'TAN Number  WEIGHT FOR LE PA. USE MUST BE  WEIGHT FOR FIRE PA. USE MUST BE  WEIGHT FOR FIRE PA. USE MUST BE  WEIGHT FOR IT BE PA. USE MUST BE  WEIGHT FOR IT BE PA. USE MUST BE  WEIGHT FOR THE PA. USE MUST BE  WEIGHT FOR LE PA. USE MUST BE  UN N 1 0 9 0  UN O'TAN Number  FA NUMBER  WEIGHT FOR LE PA. USE MUST BE  WEIGHT FOR LE PA. USE MUST BE  OUNTITY OF WASTE DELIVERED DO DO 2  2 COLVENTED TO CONVERTED TO COLVESTED TO COLV				Phone Number	<del>-</del>	EPA Number
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GRIFFITH  IN  City  State  Address  Address  Alternate (Faciny Name)  Address  Address  Alternate (Faciny Name)  Address  Address  Address  Alternate (Faciny Name)  Address	AMERICAN CHEMICAL SERVICE	E COLFAX AVE.		R.R.		01808002
Alternate (Facinity Name)  Address  Site Number  CRy Site One  CRY Site Number  CRY Site One  CRY Site One		A	ddress			39 Site Number 46
ADDRESS 20 Phone Number EPA Number  Alternate (Facinity Name) Agoress 20 Sile Number ADDRESS 20 Sile Number 20 Sile	GRIFFITH	in in	463	19 21992	44370	IND01636026
TO BE COMPLETED BY WASTE GREATOR  WASTE GREATOR  WASTE RAME  ACETONE & CONTAMINATES  WASTE PRASE:  LIQUID  (LUCUID, GASCOUS, SOING)  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIEST IS OF THE DOT HAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW:  NAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW:  NAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WEIGHT FOR LBS  WEIGHT FOR LBS  LBS  WEIGHT FOR LP P.A. USE MUST BE CONVERTED TO CU. YOS ON GALL  ON THE HOD OF SHIPMENT (CIRCIE One)  (DRUMS  Number)  TAMK FRUCK  OPEN TRUCK  OPEN TRUCK  OPEN TRUCK  OPEN TRUCK  OTHER (Specify)  THAT THE ABOVE-NAMED WASTE ARE REQUIATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND JOBA.  IL HERBEY AGREE TO AND CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION.  WASTE HAULER  LIPUID  LIPUID  (AUTHORIZED SIGNALINE)  LIPUID  LIPUID  (AUTHORIZED SIGNALINE)  LIPUID  LIPUID  LIPUID  (AUTHORIZED SIGNALINE)  LIPUID  LIPU	City	State				
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THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WASTE ACETONE  WASTE ACETONE  FLAMMABLE LIQUID  WEIGHT FOR ## ACETONE  FLAMMABLE LIQUID  WEIGHT FOR LEP A. USE MUST BE CONVERTED TO COLVEN OR GALL  OUN OF THA Number  TANK TRUCK  OPEN	Alternate (Facility Name)	A	doress	<del>_</del>		39 Site Number 46
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WASTE ACETONE  WASTE ACETONE  FLAMMABLE LIQUID  WEIGHT FOR ## ACETONE  FLAMMABLE LIQUID  WEIGHT FOR LEP A. USE MUST BE CONVERTED TO COLVEN OR GALL  OUN OF THA Number  TANK TRUCK  OPEN			<del></del>			
WASTE GENERATOR  WASTE NAME  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAINTEST IS OF THE DOT HAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WASTE ACETONE  WEIGHT FOR LES  WEIGHT FOR LES  TOMS (GIRCLE One)  WEIGHT FOR LE P.A. USE MUST BE CONVERTED TO CU. YOU GO AND A Number  WEIGHT FOR LES  WEIGHT FOR LES  WEIGHT FOR LE P.A. USE MUST BE CONVERTED TO CU. YOU GO AND A NUMBER  TOMS (GIRCLE ONE)  WEIGHT FOR LE P.A. USE MUST BE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND WINTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO O SEE AND THE CONVERTED TO CU. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO ON THE CONVERTED TO CO. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO ON THE CONVERTED TO CO. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO ON THE CONVERTED TO CO. YOU GO AGE.  OUANTITY OF WASTE DELIVERED. DO ON THE CONVERTED TO CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CONVERTED TO CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YOU GO AGE.  OUANTITY OF WASTE DELIVER. OTHER CO. YO		State	Zı	p Phone i	Number	EPA Number
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSFICATION INDICATED IMMEDIATELY BELOW:    Comment of the content of the con	WASTE GENERATOR	VCETONE & CON	: JTAMINATEC		!	LIOUTO
WASTE HAULER  I H BREBY CESTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND LACKNOWLEDGE  (1)  (Authorized Signature)  DATE: 32 / 25 / 5  (Authorized Signature)  DATE: 30 / 25 / 5  (Authorized Signature)  DISPOSAL. STORAGE, OR TREATMENT FACILITY  HAZARDOUS WASTE SUBJECT TO FEE YES NO  (Authorized Signature)	WEIGHT FOR /// 600 LBS TONS (circle METHOD OF SHIPMENT (Circle One)	WEIGHT FOR I.E.P.A CONVERTED TO CU. (DRUMS) Number	USE MUST BE OLYDS. OR GAL. OL	JANTITY OF WASTE DELIVERE  DPEN TRUCK OTHER (S	epecity)	0 0 0 1 GALLONS (Incle One) 2 CU. YUS: 1 53
THE REST CERTIFY THAT THE ABOVE DESCRIBED WASTE AND COMMENTS HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND TACKNOWLEDGE  THE DESTINATION AS INDICATED:  DATE: 52		<del>- 1</del>	Jenor	<del></del>	<u> </u>	DATE:
DISPOSAL. STORAGE, OR TREATMENT FACILITY:  HEREBY CERTIFY THE THE ABOVE DESORIBED WASTE AND INSCREED OUT INTO THAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.  COMMENTS OR SPECIAL INSTRUCTIONS.  7 STILL 7-63 8 258, 999  IN ILLINOIS. 217 / 782-3637   *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*  OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-261	// INMERICENTIFY IN	AT THE ABOVE-DESCRIBED WA INDICATED:	SIE AND QUANTITY	HAS BEEN ACCEPTED IN PRO	PER CONDITION FOR	_
DISPOSAL. STORAGE, OR TREATMENT FACILITY  HAZARDOUS WASTE SUBJECT TO FEE  THEREBY CERTIFY THE THE ABOVE DESORIBED WASTE AND INSCRIED OUTSTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.  COMMENTS OR SPECIAL INSTRUCTIONS.  70 7 57/LL 7-63 8/258, 9991  TO THE THEREBY CERTIFY THE THE ABOVE DESORIBED WASTE AND INSCRIED OUTSTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.  ONTE:		<del></del>				DATE: \$1251 81
DISPOSAL. STORAGE, OR TREATMENT FACILITY  HAZARDOUS WASTE SUBJECT TO FEE  VES  NO  CHEREBY CERTIFY THE THE ABOVE DESORIBED WASTE AND INSCRIED OUTSTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.  COMMENTS OR SPECIAL INSTRUCTIONS.  70  75  75  75  75  75  75  75  76  75  76  75  76  76	(2)			•		DATE:
COMMENTS OF SPECIAL INSTRUCTIONS.  7 STILL 7-63 8/3/8;  OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26			<del></del>	·	ZADDOUG WACTE C	HIDIECT TO FEE VEC
IN ILLINOIS. 217 / 782-3637 / OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26		VASTE AND HE CALED OUT THE	ITY HAS BEEN ACCE			4050
*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26	COMMENTS OF SPECIAL INSTRUCTIONS.	1-/0	7 571	LL 7-63	8/25/8	Sp. gm
IN ILLINOIS. 217 / 782-3637 7 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26	and the second s		<del></del>		·	
001310E ILLINO13 800 7 424-8802 01 202 7 426-26.		*24 HOUR	EMERGENCY AND SP	ILL ASSISTANCE NUMBERS*		
	IN ILLINOIS, 217 / 782-3637 /					

	ان کو ایک کار در این کار در	
No. Date 8-27-81	GENERAL FOODS CORPORATION Kankakee, Illinois	0468803
<b>66</b> 040 Gross	From Miles Lab	Authorization Number 9 9 7 1 4 9
	Trucker KID inc.	270
29,590 Tare	Contents Spent Acetonero Bin	14 Generator Number 24
36,450 Net	Weigher	I L D O 4 8 9 5 5 9 5 9
	. WASTE HAULEHIST -	
KANKAKEE INDUSTRIAL DIS		S.W.H. Registration Number 0 0 6 6 0 1 2
Hauler Name	Hauler Address 8 1 5 9 3 3 2 9	• • • • • • • • • • • • • • • • • • • •
	Phone Number	EPA Number
Hauler Name	Hauler Address	S W.H. Registration Number 32 38
	Phone Number	EPA Number
	DESTINATION — DISPOSAL STORAGE OR TREATMENT	
AMERICAN CHEMICAL SER (Facility Name)	RVICE COLFAX AVE. & C & O R.R.	9 1 8 0 8 9 0 2 Site Number 46
GRIFFITH	IN 46319 2 1 9 9	
cily parateur Cily	State Zip	Phone Number EPA Number
Alternate (Facility Name)	Address	39 Site Number 46
: City	State Zip	Phone Number EPA Number
TO BE COMPLETED BY WASTE GENERATOR		
WASTE NAM		WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)
:: THE SPECIAL WASTE BEING TRANSPORTED :	UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IM  HAZARD CLASS:	INEURIEUT BELOW.
WASTE ACETONE	FLAMMABLE LIQUID UN OF NA NU	0 9 0 U 0 0 2  EPA HW Number
		ELIVERED: 00 5000 C. CALLONS Circle One)
WEIGHT FOR LBS D.O.T. USETONS	(circle one) CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DI	ELIVERED: 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One)	(DRUMS) TANK TRUCK O	THER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE NAM	MED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED. PACKAGED. MARKED. AND EQUILATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E-EA.	LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE AB	OVE WRITTEN INFORMATION YENOTA Sa	Now DATE 8/27/81
	(Authorized Signature	e) ,
	TIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED ON AS INDICATED.	IN PROPER CONDITION FOR TRANSPORT AND LACKNOWLEDGE
Money Kor	lour.	DATE: 8/27/8/
(Authorized Signa	alure)	DATE: 54 / 59
(2) (Authorized Signa	ature)	DAIE
DISPOSAL, STORAGE, OR TREATMENT FAC	affix.	HAZARDOUS WASTE SUBJECT TO FEE YES N
HEREBY CERTIFY THAT THE ABOVE-DESC	CRIST WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SP	
. (Authorized Agrid	mile	MI 2 27 8/11
COMMENTS OF SPECIAL INSTRUCTIONS:	TO #1 STILL 7-63 8	127/81 9784
	*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUM	ABERS*
DISTRIBUTION PART - 1 GENERATOR	PART - 2 IEPA PART - 3 SITE PART - 4 HAULER - PART - 5	OUTSIDE ILLINOIS 800 / 4,4-8802 or 202 / 426-2675

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

046880	15
<del></del>	<del>-</del>

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES	195 W. B	IRCH ST.	81593782	70 091	0550008	} - <sub>G</sub>
(Company Name)	Address	60901	, Phone Number	14	Generator Number	′O E O
KANKAKEE	I L State	Zip			O 4 8 9 5 5	9 9 9
City .	State	WASTE HA	III FR/S)		Era Number	<del></del>
KANKAKEE INDUSTRIAL DISPOS		ocusit (		S.W.H Registration Num	0 0 6 6 C	) 1 2
Hauler Name	Hauler Address	8 1	59332931	110	0541550	າ 8 ດ
•		<del>-</del> <del>-</del>	Phone Number		EPA Number	
· · <u> </u>				S.W.H. Registration Nurr	nber	
Hauler Name	Hauler Address			·	32	38
			Phone Number		EPA Number	
	DESTINATIO	N — DISPOSAL ST	DRAGE OR TREATMENT SITE			
AMERICAN CHEMICAL SERVICE	COLFAX AVE.		R.R.		918089	0 2
(Facility Name)		dress	ולול כממיב מו	270 110	Site Number 5 0 1 6 3 6 0	265
GRIFFITH	IN State	463:	19 2 1 9 9 2 4 4 Phone Number	310 INT	EPA Number	205
			,			
Alternate (Facility-Name)	Ad	dress	<del></del>	7	Site Number	40
City	State		Phone Number		EPA Number	
TO BE COMPLETED BY	State	3. 2.	p : Those Number		CFA Number	
WASTE GENERATOR WASTE NAME:	ACETONE & CO	NTAMINATE	S: WASTE PI	HASE:	LIQUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS	S MANIFEST IS OF THE DOT	HAZARD CLASSIFI			iquid, Gaseous Solio)	
SHIPPING DESCRIPTION.	HAZARD CLASS:		UN1090	11	0 0 2	
			UN or NA Number		Number	
				0.000	CALLONS	ırcle One)
D.O.T. USE LBS TONS (circle one)	WEIGHT FOR I.E.P.A. CONVERTED TO CU. Y	DS. OR GAL QL	IANTITY OF WASTE DELIVERED: 0	05000	2 CU. YDS.	1
NCTUOD OF CUIDNEST (Circle One) (OD)	c	ANK TRUCK	DPEN TRUCK OTHER (Specify)		-	53
METHOD OF SHIPMENT (Circle One) (DRI	Number	HIVE TRUCK	OPEN TRUCK OTHER (Specify)			
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIED	DESCRIBED, PACK	AGED. MARKED, AND LABELED AND	IS IN PROPER CONDITION	FOR TRANSPORTATION	
REBY AGREE TO AND CERTIFY THE ABOVE WRITTE	1	lonon	a Darloer	DAT	. 9/1/8/	
A STANCE TO AND CENTER THE ABOVE WHITE	W IN CHIMATION		(Authorized Signature)	DAT		
FR // HEREB CERTIFY THAT T	HE ABOVE-DESCRIBED WAS	/ . TE AND QUANTITY	HAS BEEN ACCEPTED IN PROPER COM	VDITION FOR TRANSPORT	AND LACKNOV/LEDGE	
THE DESTINATION AS INDI					_	~ ,
\$10		•		0.	u 9///	8/
sized Signature)				٠	TE	59
alure)	•	<b>∤</b> →	1	DA	ATE:	
				IS WASTE SUBJECT TO F	EE YES	NO
	F AND INDICATED QUANTI	TY HAS BEEN ACCE	PTED AT THE SITE SPECIFIED ABOVE		$\mathbf{G}_{\mathbf{G}}$	DI
			•	D	1.1E = 00	<u>~</u>
	1	1 7-1	3 9/1/81 Que	Dn.4		
	<u>\$71</u>	<u> </u>	3 11.181 G/2	M	<del></del>	
医乳性性 经规模的 医二种的		<del></del>		<del></del>		
		NCY AND SP	ILL ASSISTANCE NUMBERS*	OUTSIDE ILI INIC	DIS 800 / 424-8802 or 202	/ 126-2674
	<ul> <li>(2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2</li></ul>	4 HAL	JLER PART - 5 IEPA PA	ART 6 - GENERATOR	2 0001 - 0002 0- 202	

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468807

uthorization Number 9 9 7 1 4 9

MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008
(Company Name)	Address	Phone Number	Generator Number 24
KANKAKEE	IL 60901	<del>-</del>	ILD048955959
City	State Zip	E HAULER(S)	EPA Number
	MYZI		·
KANKAKEE INDUSTRIAL DISPOSAL	L 1360 E. LOCUST		V.H. Registration Number-25 0 0 6 6 0 2 2
Hauler Name	Hauler Address		
		159332931 Phone Number	I L D 0 5 4 1 5 5 0 8 0
	•	•	EPA Number
Hauler Name	Hauler Address	S.V	V H. Registration Number 32 38
		1.	
		Phone Number	EPA Number
		STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & C	0 R.R.	. <u>91808902</u>
(Facility Name)			
GRIFFITH City	IN	46319 2 1 9 9 2 4 4 1 Phone Number	370 INDO1636026
- City		. Lip Flidite Hullidei	
Atternate (Facility Name)	Address	<del></del>	39 Site Number 46
, vicendia (i somy name)			One wanter
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR	ACETONE & CONTAMINA	· .	
WEIGHT FOR 37,8/0 LBS TONS (circle one	RUMS	UN 1 0 9 0  UN OF NA NUMBER  OUANTITY OF WASTE DELIVERED. 47  OPEN TRUCK OTHER (Specify) —  PACKAGED, MARKED, AND LABELED AND IS PORTATION AND LE.P.A.	52 53
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION	(Authorized Signature)	
I HEREBY CERTIFY THAT THE DESTINATION AS INC.  (1) (Authorized Signature)  (Authorized Signature)	ller.	ITY HAS BEEN ACCEPTED IN PROPER CONDI	TION FOR TRANSPORT AND LACKNOWLEDGE  DATE: $\frac{O}{54} = \frac{9}{2} = \frac{2}{5} = \frac{1}{5}$ DATE: $\frac{O}{5} = \frac{1}{5} = 1$
. DISPOSAL, STORAGE, OR TREATMENT FACILITY			
	STE AND INDICATED QUANTITY HAS BEEN A		DATE J. J. S
COMMENTS OR SPECIAL INSTRUCTIONS:	70 #7 571LL 9/	22/81 7-63	Sim
IN ILLINOIS, 217 / 782-3637	*24 HOUR EMERGENCY AN	D SPILL ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-26
DISTRIBUTION PART 1 GENERATOR PART - 2	2 IEPA PART - 3 SITE PART - 4	HAULER PART 5 IEPA PART	6 - GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST 0468808

Authorization Number  $\frac{9}{8}$   $\frac{9}{7}$   $\frac{7}{1}$   $\frac{14}{13}$   $\frac{9}{13}$ 

MILES LABORATORIES	195 W. BIR	сн sт. 81	5937827	0 09105	50008 <sub>G</sub>
(Company Name)	Address	(000	Phone Number	14 Generator	
KANKAKEE	. I <u>L</u>	60901 <sub>हैं</sub>	<i>;</i>	ILD048	955959
City	State	Zio	<u> </u>	EPA Numi	oer .
		WASTE HAULER(S)			,
KANKAKEE INDUSTRIAL DISPOS	AL	HST WAR			0066012
Hauler Name	Hauler Address	031	, s	W H. Registration Number	1 0 0 0 0 1 2 .
naulei hame		8159	332931		**
			e Number	1 L D O 3 4	155080 Number
		÷	ς.	W H. Registration Number	
· Hauler Name	Hauler Address		·	32	38
	DECTINATION	- DISPOSAL STORAGE OR	e Number	EPA	Number
AMEDICAN CUENTCAL SERVICE		& C & O R.R.	TREATMENT SITE	0.1	9 0 9 0 0 3
AMERICAN CHEMICAL SERVICE (Facility Name)	Addre			. <u>9_1_</u>	8 0 8 9 0 2 Site Number 46
GRIFFITH	IN	46319	2/100211	370 INDO	
City	State	Zip	Phone Number		Number
			33 4 miles		
Alternate (Facility Name)	Addre	255		39 —	Site Number 46
	;	المستعرب			
City	State	Zip	Phone Number	EPA	Number
TO BE COMPLETED BY	ACCITONE & CON	CAMINATEC			,
WASTE GENERATOR WASTE NAME:	ACETONE & CON	HAMINATES	WASTE PHA	ISE	QUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE		IAZARD CLASSIFICATION IN	DICATED IMMEDIATELY BELO	W; (Liquid, Gased	ius. 50HO)
SHIPPING DESCRIPTION:	HAZARD CLASS:	U	N1090	U 0 0 2	
WASTE ACETONE	FLAMMABLE LI	01450	N or NA Number	EPA HW Number	-
		<del></del> -	•	_	
WEIGHT FOR 4/1 - CO LBS	WEIGHT FOR I.E.P.A. US e) CONVERTED TO CU. YOS	SE MUST BE QUANTITY OF	WASTE DELIVERED:	15000	GALLONS Direte One)
D.O.T. USE TONS (circle on	e) CONVENTED TO CO. 103	المنتقع	47	52	53
METHOD OF SHIPMENT (Circle One) (D		K TRUCK OPEN TRUC	K OTHER (Specify) _		
<i>t</i> ∉	Number		•		
THIS IS TO CERTIFY THAT THE ABOVE NAMED WAST IN ACCORDANCE WITH THE APPLICABLE REGULATION	E ARE PROPERLY CLASSIFIED. & IS OF THE ILLINOIS DEPARTMEN	DESCRIBED, PACKAGED, MA NT/OF TRANSPORTATION AN	RKED AND LABELED AND IS D LEA A	IN PROPER CONDITION FOR TRAF	SPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	\ \	Komma V	Dunlier	9/_	2 <i>9  81</i>
THEREBY AGREE TO AND CERTIFE THE MOUVE THAT		(Authorize	ed Signature)	OATE /S	
WASTE HAULER A LUEDERY CERTIFY THAT	THE ADDRESS OF CORRESPONDED WASTE				
THE DESTRIATION AS AN	DICATED.	. AND QUANTITY HAS BEEN	ACCEPTED IN PROPER COND	ITION FOR TRANSPORT AND I ACK	NOWLEDGE
1 5/ 1/11 - 4	<i>!</i> -				2 70 d1
in shund. 1. 15 471	<u></u>			DATE Z	<u> 12718                                  </u>
Adinorized Signature)		,	Sakar 🕴 🔭	54	59
(2)	<del></del>	) · · · · · · · · · · · · · · · · · · ·	· *	DATE.	//
- (Authorized Signature)				····	
DISPOSAL. STORAGE, OR TREATMENT FACILITY"			- HAZARDOUS	WASTE SUBJECT TO FEE YES_	NO X
LHEREBY CERTIFY THAT THE ABOVE DESCRIBED WA	ASTE AND INDICATED QUANTITY	HAS BEEN ACCEPTED AT 1			
		. ,		our 9	P9181
(Authorized Signature)			.:- \$**	DAIE. Z	-1 <del>-1 -1 -1</del>
COMMENTS OF STREET, MICHOLD TONG	70	<del>*</del> 7 <del></del>	7-12 c/20/8	1 0000	·····
COMMENTS OR SPECIAL INSTRUCTIONS		1 37122	<u>0/19/6 دیا - ر</u>	1 92m.	
- figure	<u> </u>		1	<del></del>	
	*24 HOUR FM!	ERGENCY AND SPILL ASSIST	IANCE NUMBERS	<del></del>	
W-ILLINOIS: 217 / 782-3637 DISTRIBUTION PART - 1 GENERATOR PART -		PART - 4 HAULER		OUTSIDE ILLINOIS: 800 / 4	124-8802 or 20? / 426-2675
TAIL TOURISM TAIL TOURISM TAIL	33170	THROLEN	INDI-JICEA PAR	10 - GEINEUM I ON	

## ry ya in jayan ziya i STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0468809

WASTE GENERATOR	2200 CHURCHILL RO	AD, SPRINGFIELD, ILLINOI 217) 782-6760		Authorization Number 997	149
		STE HAULING MANIFEST		8	- T
MILES LABORATORIES	195 W. BIRCH S		8270		0 8 6
(Company Name) KANKAKEE	IL Address	Phone Num	nber	Generator Number	74 15 9 5 9
City	State Zig	D	<u>`                                    </u>	EPA Number	
		WASTE HAULER(S)			1
ANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	<i>Y.</i>	S.W H.LR	gistration Number 4 040-6	6 6 1 2
Hauler Name	Hauler Address	8 1 5 9 3 3 2 9	. 2 1	ILD05415	5080
The state of the s	1	Phone Number		EPA Number	<u> </u>
Hauler Name	Hauler Address		S.W.H. Ro	egistration Number	
natier Name	Hadiel Address	~			-
		Phone Number		EPX Nymper	
AMERICAN CHEMICAL SERVICE	DESTINATION - DIST	POSAL STORAGE OR TREATMENT S	SITE	91808	3 9 0 2
(Facility Name)	Address			39 Site Num	
GRIFFITH	State	46319 2 1 9 9		0 IND0163	6026
City	State	Zip · _ ; Ph	none Number	:" EPA Number	. ,
Alternate (Facility Name)	A Address •	· · · · · · · · · · · · · · · · · · ·		39 Site Num	nber 40
City	State , , ;	Zip Ph	anna Alumbar		
TO BE COMPLETED BY	Olaic , V.2 (-	Ph کی د	ione Number	EPA Number	<u> </u>
WASTE GENERATOR WASTE NAME.	ACETONE & CONTAMIN	ATES	WASTE PHASE	LIQUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE	• 7,	CLASSIFICATION INDICATED IMMI	EDIATELY BELOW.	(Liquid, Gaseous, Solid	
SHIPPING DESCRIPTION	HAZARD CLASS.	~UN10	9 0	<sub>χ</sub> υ 0 0 2	v.
WASTE ACETONE	FLAMMABLE LIQUID			EPA HW Number	
WEIGHT FOR 4/1590 LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUS CONVERTED TO CU. YDS. OR G		IVERED. 0	50 0 0 GALLO	Circle One)
METHOD OF SHIPMENT (Circle One) (DRI	UMS	OPEN TRUCK OTH	HER (Specify)	1	<u></u> -%
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIED. DESCRIB	BED. PACKAGED. MARKED. AND LA	ABELED AND IS IN PRO	PER CONDITION FOR TRANSPORTAT	ION.,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	Va		rber	DATE 10/5/	?! ?!
THERE AND CENTER THE ABOVE WHATE	7	(Authorized Signature)		- / /	
MASTE HAULER  HERELY CERTIFY THAT THE DESTINATION AS INDI	HE ABOVE-DESCRIBED WASTE AND CONTENT OF THE CONTENT OF T	DUANTITY HAS BEEN ACCEPTED IN	PROPER CONDITION FO	OR TRANSPORT AND : ACKNOWLED	
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COMMICHTS OF STEERING INSTRUCTIONS.	<u>,</u>	1-1-1	- J- / / / .	<del></del>	•
IN ILLINOIS: 217 / 782-3637  DISTRIBUTION PART: 1 GENERATOR PART: 2		CY AND SPILL ASSISTANCE NUMBER ART - 4 HAULER PART - 5 IEI		UTSIDE ILLINOIS 800 / 424 8502	or 202 / 476-2675
REV # 3	AND SUBJECT PA	THAULER PART 5 IE	PA PART 6 - GET	SCRATUR 7	

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST  $\underbrace{0468810}_{,}$ 

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES	195 W. BIRCH	ST. 8 1	59378270		. — — — —
(Company Name)  KANKAKEE	Address	60901	Phone Number	14 Generator Numb	•
City	State	Zip	•	I L D 0 4 8 9	<u> 55959</u>
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AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE.		<b>.</b>	9 1 8 C	8 9 0 2 Number 40
GRIFFITH	IN	46319		370 IND016	<u>36026</u>
City	State	-Zip	Phone Number	EPA Numbi	er
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### **STATE OF ILLINOIS**

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0468811

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES (Company Name)	195 W. BIR		Phone Number	14 Generator Number	er 2
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TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468812

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Authorization	Number			•	_	•	_	

(Company Name)  KANKAKEE			Phone Number	14	Generator Number
KANKAKEE	Address	60901	rnone domoei		L D O 4 8 9 5 5 9
City	State	Zip			EPA Number
		WASTE HAI	ULER(S)		N.
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GRIFFITH	IN	463	19 219924	4370	IND0163602
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TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL . 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 - . SPECIAL WASTE HAULING MANIFEST 0468813

Authorization Number 997149

MILES LABORATORIES	195 W. BIRCH ST.	81593782	
(Company Name)	Address	Phone Number	Generator Number 24
KANKAKEE	IL 6090	<u>.1</u>	<u> </u>
Сну	State Zip		EPA Number
	WA:	STE HAULER(S)	
ANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W.H. Registration Number 0 0 6 6 0 1 3
Hauler Name	Hauler Address		75 31
·	-	3 1 5 9 3 3 2 9 3 1 Phone Number	I L D O 5 4 1 5 5 0 8 0 EPA Number
			S.W H. Registration Number
Hauler Name	Hauler Address		32 38
		Phone Number	EPA Numper
	DESTINATION — DISPOS	SAL STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C &		91808902
(Facility Name)	Address		$\frac{9}{39} \frac{1808}{5 \text{ lite Number}} \frac{902}{4}$
GRIBFITH	IN	46319 2199244	370 INDO1636026
City	State	Zip Phone Number	EPA Number
Alternate (Facility Name)	Address		Site Number 46
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY		Lip Tallie Halliet	Era Aumoei
WASTE GENERATOR WASTE NAME:	ACETONE & CONTAMIN	IATES	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH	IS MANIFEST IS OF THE DOT HAZARD CL	ASSIFICATION INDICATED IMMEDIATELY R	FRASC.
SHIPPING DESCRIPTION:	HAZARD CLASS.	TO THE THE PARTY OF THE PARTY O	
		. UN1090	U 0 0 2
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number
WEIGHT FOR 39, 100 LBS TONS (circle one	WEIGHT FOR I.E.P.A. USE MUST B CONVERTED TO CU. YDS. OR GAL.		05000 0 1 GALLONS (Circle One)
. METHOD OF SHIPMENT (Circle One) (DF	RUMS) TANK TRUCK )	OPEN TRUCK OTHER (Specify)	53
	Number	i i i i i i i i i i i i i i i i i i i	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATION	ARE PROPERLY CLASSIFIED DESCRIBED	. PACKAGED. MARKED AND LABELED AND	IS IN PROPER CONDITION FOR TRANSPORTATION.
•	\ to a	ATA DISTANT	11/9/01
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION	(Authorized Signature)	DATE.
WASTE HAULER			
THE DESTINATION AS INC	THE ABOVE-DESCRIBED WASTE AND QUAI DICATED.	NTITY HAS BEEN ACCEPTED IN PROPER CO	INDITION FOR TRANSPORT AND I ACKNOWLEDGE
.00.			
(1) Von Engelmon			DATE: 1/1/09/8/
(Authorized Signature)	,		54 59
(2)(Authorized Signature)	<u> </u>		DATE:
(Aumorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	1	HAZARDO	US WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT HE STOVE DESCRIPTION	INDICATED QUANTITY HAS BEEN	ACCEPTED AT THE SITE SPECIFIED ABOVE	119 01
IN CHANGE			DATE.
(Authorized Signature)			, 60 os
COMMENTS OR SPECIAL INSTRUCTIONS:			
Sommers on a come marriage from .			
		<u> </u>	
IN ILLINOIS 217 / 782-3637	*24 HOUR EMERGENCY A	AND SPILL ASSISTANCE NUMBERS*	DUTSIDE ILLINOIS 900 / 404 (1900 200 200 200
DISTRIBUTION PART - 1 GENERATOR PART - 2	IEPA PART - 3 SITE PART	· 4 HAULER PART · 5 IEPA P	OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267 PART 6 - CENERATOR
REV # 3		<u> </u>	<del></del>

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

	SPECI	(217) 782-6760 AL WASTE HAULING	MANIFEST	Authorization Number	タイユ <b>イ</b> タ、
MILES LABORATORIES	195 W. BIR	сн sт.' 8/1	59378270	0910550	0 0 8
(Company Name) KANKAKEE	Address IL.	60901	Phone Number	ILD0489	
. City	State	Zip	<del>-</del>	EPA Number	
ankaree industrial disposal		WASTE HAUDER(S)	f o ₹ o o o o o o o o o o o o o o o o o	H. Registration Number0_0	6 6 0 1
Hauler Name	Hauler Address	8 1 B 9		ILD 0 5 4 1	
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Hauler Name	Hauler Address			.H. Registration Number	
		Pho	one Number	EPA Num	oer
· Prefi		N — DISPOSAL STORAGE OF	R TREATMENT SITE		
AMERICAN CHEMICAL SERVICE (Facility Name)		& C & O R.R.			8 9 0 2 Number
GRIFFITH	IN	46319	21992443	70 IND016	
City	State	Zıp	Phone Number	EPA Numo	
File of the second of the	and the second				·
Alternate (Facility Name)	. Add	iress	•	- 39 Site	Number
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्राक्ष्य हिन्स् स्थापित क्षिप्र क्षिप्	State	Zip ş	Phone Number	EPA Numi	er -
TO BE COMPLETED BY WASTE GENERATOR	ACETONE &	CONTAMINATES	<b>漢字文 2.1</b>	LIQUID	ر المان المان المان المان
WASTE NAME:		<del>``</del>	_ WASTE PHASE		
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH	HAZARD CLASS:	MAZARU CLASSIFICATION II	", ANDICATED IMMEDIATELY REFORM	(2450.000000.0	
3 SHIFFING DESCRIPTION.	}		UN1090	U 0 0 2	•
WASTE ACETONE	FLAMMABLE	ridnip —	UN or NA Number	EPA HVV Number	·
WEIGHT FOR 39,490 (Circle one	WEIGHT FOR LE.P.A. CONVERTED TO CU Y	USE MUST BE QUANTITY (	DF WASTE DELIVERED. $\frac{d}{d}$	5000 (1 G)	LLONS Circle One
METHOD OF SHIPMENT (Circle One) (DF	Number ) TA	NK TRUCK OPEN TRU	CK OTHER (Specify)		
*THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATION	ARE PROPERLY CLASSIFIED S OF THE ILLINOIS DEPARTM	. DES RIBED. PACKAGED. M. ENT OF TRANSPORTATION A	ND JEP.A.	PROPER CONDITION FOR TRANSPOR	ITATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION	Alwara. (Authori.	Darbar Signaturei	DATE	181
WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS INC	THE ABOVE DESCRIBED WAS	TE AND QUANTITY HAS BEEN	N ACCEPTED IN PROPER CONDITI	ON FOR TRANSPORT AND : ACKNOW!	LEDGE
(1) All Market Signature)	riller	A STATE OF THE STA	1	DATE / G	22/8/
(Authorizea Signature)				DATE	<u> </u>
DISPOSAL. STORAGE, OR TREATMENT FACILITY*		ा है	HAZARDOUS W	ASTE SUBJECT TO FFE YES	NO X
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	STE AND INFICATED QUANTU	Y HAS BEEN ACCEPTED AT		1/	- Ki
(Authorized Signatury)	WO KILL	. A		DATE &	
COMMENTS OR SPECIAL INSTRUCTIONS	To	110 K	T-63 EXN	11/2/81	

AN ILLINOIS: 217 / 782-3637
DISTRIBUTION PART - 1 GENERATOR

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE (LLINOIS 800 / 424-8802 or 20? / 426-2675

PART - 3 SITE PART - 2 IEPA

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

## **STATE OF ILLINOIS**

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HALILING MANIFEST

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						_	

Authorization Number 997149

	SPEC	TAL WASTE HA	AULING MANIFEST	'i •	·
MILES LABORATORIES	195 W. BI	RCH ST.	81593782	70 091	0550008 6
(Company Name)	Addres		Phone Number		Generator Number 24
KANKAKEE	IL State	60901 Zio		<u>I L c</u>	O 4 8 9 5 5 9 5
City	State		AULER(S)	<del></del>	EPA NUMBER
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	;		
KANKAKEE INDUSTRIAL DISPOSAL	. 1360 <b>₽. L</b> oc	:UST.	, <b>v</b> .	S.W H Registration Num	ber $\frac{0.06601}{25}$
Hauler Name	Hauler Address	٠, ١			
		81	59332931 Phone Number	1 L D	0 5 4 1 5 5 0 8 0
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Hauler Name	Hauler Address	•		S.W.H. Registration Num	32 3
		·			
	DECTINATI	ON DISPOSAL S	Phone Number TORAGE OR TREATMENT SITE		EPA Number
AMERICAN CHEMICAL SERVICE	COLFAX AVE.				.01808002
(Facility Name)		doress 🛴 🔑		7	· 9 1 8 0 8 9 0 2 Site Number
GRIFFITH	IN	* '46	319 219924	4370 IN	D01636026
City	State		Zip Phone Numb		EPA Number
		<u> </u>	<del></del>	·	
Alternate (Facility Name)	A. ښاند د سره په	doress	whiteman is a second of		39 Şite Number 4
City	State		Zip Phone Numb	ar — — — — — — — — — — — — — — — — — — —	EPA Number
TO BE COMPLETED BY	· · · · · · · · · · · · · · · · · · ·	<del>`</del>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
WASTE GENERATOR WASTE NAME:	ACETONE & CO	NTAMINATE	S WASTE	PHASE:	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH	•	T HAZARD CLASSIF	ICATION INDICATED IMMEDIATELY	BELOW: (L	iquid, Gaseous, Solid)
SHIPPING DESCRIPTION:	HAZARD CLASS:	-		11	0.00
WASTE ACETONE	FLAMMABLE.L	.IQUID	UN or NA Number		0 0 2 Number
		<del></del>		10500	
WEIGHT FOR 4/40 LBS TONS (circle one	WEIGHT FOR I.E.P.A CONVERTED TO CU.		DUANTITY OF WASTE DELIVERED:		GALLONS Circle One)
7-7-7		Section of the least of the lea	•		53
METHOD OF SHIPMENT (Circle One) (DF	Number )	TANK TRUCK	OPEN TRUCK OTHER (Specif	n	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE	ARE PROPERLY CLASSIFIE	D. DESCHIBED, PAC	KAGED, MARKED, AND LABELED AN	ID IS IN PROPER CONDITION	N FOR TRANSPORTATION.
MIN ACCORDANCE WITH THE APPLICABLE REGULATION		MENT OF TRANSPO	RIATION AND LEPPA.	)	12/15/81
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WASTE HAULER	<del></del>			<u> </u>	
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(Adjustized Signature)				_	/ /
(Authorized Signature)				D	ATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY		<del> </del>			<del></del>
	STO AND INDICATED OLIAN	HTV HAS PEEN ACC	HAZARD :: EPTED AT THE SITE SPECIFIED ABO	OUS WASTE SUBJECT TO F	TEE YES NO
() HILLE GO	SPE AIRD INDICATED COAIR	PITT HAS BEEN ACC			17115181
(Abiliorized Signature)	<del></del>		· ·	D	ATE 6 21/5/8/
	; A*		<del></del>		M
COMMENTS OR SPECIAL INSTRUCTIONS		· · · · · · · · · · · · · · · · · · ·			
HOULINIOIS 217 / 792,2627		EMERGENCY AND S	PILL ASSISTANCE NUMBERS*	Outerbe III	215 000 1 121 1000 000 1122 21
DISTRIBUTION PART 1 GENERATOR PART 2				PART 6 - GENERATOR	DIS. 800 / 424-8802 or 202 / 426-26
REV. # 3			TO #7 Still	T-63 GRM	1 13/1-1
SITE C	OPY - PART 3		10 / 31111	, 07 3 7	113/81

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL

MILES LABORATORIES  (Company Name)  KANKAKEE  City  State  KANKAKEE INDUSTRIAL DISPOSAL  Hauter Aggress  Hauter Aggress  Hauter Name  Hauter Aggress  Hauter Aggress  Hauter Aggress  Hauter Aggress  Adgress  GRIFFITH  IN  City  State  Colfax Ave. & Adgress  Adgress  Griffith  IN  City  State  City  State  Adgress  Adgress  TO BE COMPLETED BY WASTE GENERATOR  WASTE ACETONE  METHOD OF SHIPMENT (Circle One)  TANK TRI Number  TANK TRI Number  TANK TRI Number  I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  WASTE HAULER  LHEREBY CRITIFY THAT THE ABOVE DESCRIBED WASTE AND  Address  CITY  TANK TRI Number  TANK TRI Number  LHEREBY CRITIFY THAT THE ABOVE DESCRIBED WASTE AND  TANK TRI Number  LHEREBY CRITIFY THAT THE ABOVE DESCRIBED WASTE AND  TO DESTINATION AS JODICATED  DISPOSAL STORAGE, OR TREATMENT FACILITY  DISPOSAL STORAGE, OR TREATMENT FACILITY	20AD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 Authorization Number 9 9 7 1 4 . 9
Company Name)  KANKAKEE  Gity  State  CANKAKEE INDUSTRIAL DISPOSAL  Hauter Name  Hauter Aggress  Hauter Name  Hauter Aggress  Hauter Aggress  Hauter Name  Hauter Aggress  Aggress  Aggress  GRIFFITH  IN  City  State  Alternate (Facility Name)  Address  Address  Alternate (Facility Name)  Address  Address  ACETONE & CONT.  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAT SHIPPING DESCRIPTION  WASTE ACETONE  FLAMMABLE LIQU  WEIGHT FOR LE P.A. USE M CONVERTED TO CU. YDS. OR METHOD OF SHIPMENT (Curcle One)  I HEREBY AGREE TO AND CERTIFY THAE ABOVE WRITTEN INFORMATION  WASTE HAULER  LHEREBY CRITIFY THAE ABOVE DESCRIBED WASTE AND MIDICATED GUATITITY HAS MALTER AND MIDICATED GUATITITY HAS MAL	VASTE HAULING MANIFEST 8
ANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST  Nauler Name Hauler Address  Hauler Name Hauler Address  Hauler Name Hauler Address  AMERICAN CHEMICAL SERVICE COLFAX AVE. 8  (Facility Name) Address  GRIFFITH IN  City State  TO BE COMPLETED BY WASTE NAME ACETONE & CONT.  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAR SHIPPING DESCRIPTION HAZARO CLASS  WASTE ACETONE FLAMMABLE LIQU  WEIGHT FOR LE P.A. USE M CONVERTED TO CU. YDS. OR TON'S (circle one) CONVERTED TO CU. YDS. OR TON'S	
Hauler Name  Hauler Address  Hauler Address  DESTINATION —	Phone Number 14   Generator Number 24
Hauler Name  Hauler Address  DESTINATION — D  AMERICAN CHEMICAL SERVICE  COLFAX AVE. & Address  GRIFFITH  IN  City  State  City  State  TO BE COMPLETED BY WASTE NAME.  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAS SHIPPING DESCRIPTION  WASTE ACETONE  WEIGHT FOR LE P.A. USE M CONVERTED TO CU. YDS. OR CONVERTED TO CU	Zio EPA Number
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DESTINATION — D  AMERICAN CHEMICAL SERVICE  (Facility Name)  Address  GRIFFITH  IN  City  State  Address  Alternate (Facility Name)  Address  City  State  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAL SHIPPING DESCRIPTION  WASTE ACETONE  WEIGHT FOR LESS  WASTE ACETONE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  I HEREBY AGREE TO AND CERTIFY THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED DESCRIPTION  I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  WASTE HAULER  L HEREBY CRITEY THAT THE ABOVE DESCRIBED WASTE AND MUCCATED GUAVITHY HAS INCOMPAGED OF THE ILLINOIS DEPARTMENT OF THE DESTINATION AS IDICATED  THE DESTINATION AS IDICATED  DISPOSAL STORAGE, OR TREATMENT FACILITY  THE DESTINATION AS IDICATED GUAVITHY HAS INCOMPAGED SUGNIFIES AND MUCCATED GUAVITHY HAS INCOMPAGED SUGNIFIES.	S W.H. Registration Number
AMERICAN CHEMICAL SERVICE  (Facility Name)  (Facility Name)  (City  (Cit	8159332931 1 L D 0 5 4 1 5 5 0 8 0
MERICAN CHEMICAL SERVICE  COLFAX AVE. &  (Facility Name)  Address  GRIFFITH  IN  City  State  City  State  City  State  TO BE COMPLETED BY WASTE NAME  ACETONE & CONT.  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAS SHIPPING DESCRIPTION  WASTE ACETONE  WEIGHT FOR LBS  UNASTE ACETONE  WEIGHT FOR LE P.A. USE M CONVERTED TO CU. YDS. OR  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIPTION ACCORDANCE WITH THE ABOVE WRITTEN INFORMATION  WASTE HAULER  LHEREBY CRITIFY THAT THE ABOVE WRITTEN INFORMATION  WASTE HAULER  LHEREBY CRITIFY THAT THE ABOVE DESCRIBED WASTE AND CIRCLED GUANTITY HES STORAGE, OR TREATMENT FACILITY  LAURDONIZEC SIGNATURE)  DISPOSAL STORAGE, OR TREATMENT FACILITY  LAURDONIZEC SIGNATURE)  DISPOSAL STORAGE, OR TREATMENT FACILITY  LAURDONIZEC SIGNATURE)	Phone Number EPA Number
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AMERICAN CHEMICAL SERVICE  (Facility Name)  (GRIFFITH  (City  (Ci	Phone Number EPA Number
GRIFFITH  City  State  Alternate (Facility Name)  Address  City  State  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAL SHIPPING DESCRIPTION  WEIGHT FOR LBS TONS (circle one)  METHOD OF SHIPMENT (CIRCLE ONE)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIPTION ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF THE ILLINOIS DEPARTME	DISPOSAL STORAGE OR TREATMENT SITE
CRIFFITH  City  State  Address  City  State  TO DE COMPLETED BY WASTE GENERATOR  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZAR SHIPPING DESCRIPTION  WEIGHT FOR  WEIGHT FOR  LBS 10NS (circle one)  METHOD OF SHIPMENT (CIRCLE ONE)  TANK TRI Number  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESC IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF THE REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION  WASTE HAULER  THE PEST MATION AS IDICATED  THE DEST MATION AS IDICATED  DISPOSAL STORAGE, OR TREATMENT FACILITY  MEBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND MIDICATED GUATIETY HAS LABOURCE SIGNALUES.	C & O R.R. 9 1 8 0 8 9 0 2
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IN ILLIMOIS 217 / 782-3637 24 HOUR EMERGE	ENCY AND SPILL ASSISTANCE NUMBERS*  OUTSIDE ILLINOIS 800 / 424-8302 or 20" - 426-24
	PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

SITE COPY - PART 3

TO 110 K T-63 6 RM 1/11/82

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 <u> 0552225</u>

Authorization Number 997149

SPECIAL WASTE HAULING MANIFEST 195 W. BIRCH ST. 8159378270 0910550008 MILES LABORATORIES (Company Name) 60901 ILD048955959 KANKAKEE IL City State Zip WASTE HAULER(S) S.W.H. Registration Number  $\frac{0.0660012}{25}$ KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST Hauler Name Hauler Address I L D O 5 4 1 5 5 0 8 0 S.W.H. Registration Number Hauler Address Hauler Name ADESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 91808902 AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. .: (Facility Name) 2199244370 IND01636026 **GRIFFITH** IN State Address Alternate (Facility Name) Site Number Phone Number EPA Number City TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: .. WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW · HAZARD CLASS: SHIPPING DESCRIPTION. UN1090 UN or NA Number WASTE ACETONE FLAMMABLE LIQUID EPA HW Number WEIGHT FOR I.E.P.A. USE MUST BE OUANTITY OF WASTE DELIVERED: 0 0 50 0 0 CONVERTED TO CU. YDS. OR GAL. TONS (circle one) TANK TRUCK OPEN TRUCK OTHER (Specify) METHOD OF SHIPMENT (Circle One) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED. PACKAGED. MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEFA. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRAISPORT AND LACKNOWLEDGE DATE () /5/8/2 (Authorized Signature) DISPOSAL STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE STYE SPECIFIED ABOVE (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS -800 / 424-8802 or 20? / 426-2675 DISTRIBUTION PART - 1 GENERATOR PART - 3 SITE PART 6 - GENERATOR PART - 5 IEPA

#### STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY TO BE COMPLETED BY DIVISION OF LAND POLLUTION CONTROL **WASTE GENERATOR** 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 -(217) 782-6760 Authorization Number SPECIAL WASTE HAUTING MANIFEST 7 -8 1 5 9 3 7 8 195 W. BIRCH ST. 0910550008 MILES LABORATORIES Address (Company Name) 60901 KANKAKEE IL ILD048 City State EPA Number Zip i WASTE HAULER(S) KANKAKEE, INDUSTRIAL, DISROSAL 1360 E. LOCUST S.W.H. Registration Number \_\_\_\_ 0\_0 Hauler Address S.W.H. Registration Number Hauler Address Hauler Name FPA Number DESTINATION -DISPOSAL STORAGE OR TREATMENT SITE AVE. E C E COLFAX O.R.R. 9180890 AMERICAN CHEMICAL 9 2443 IN NDO State Alternate (Facility Name) Site Number State Phone Number City EPA Number TO BE COMPLETED BY WASTE GENERATOR WASTE NAME ACETONE'S CONTAMENATES WASTE PHASE LIQUID (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS. UN11090 U 0 0 2 FLAMMABLE LIQUID WASTE ACETONE 1 GALLONS (Circle One) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. WEIGHT FOR TANK TRUCK OPEN TRUCK 6THER (Specify) METHOD OF SHIPMENT (Circle One) (DRUMS\_ Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED. MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION WASTE HAULE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTELAND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND LACKNOWLEDGE THE DESTINATION AS INDICATED (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACUITY \* HAZARDOUS WASTE SUBJECT TO FEE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAST, AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE (Authorized Signature) -COMMENTS OR SPECIAL INSTRUCTIONS ... 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS 217 / 782-3637 OUTSIDE ILLIMOIS 800 / 424-8802 or 20? / 426-267 DISTRIBUTION PART - 1 GENERATOR PART - 3 SITE PART - 2 IEPA PART - 4 HAULER PART 6 - GENERATOR PART - 5 IEPA

SITE COPY - PART 3

# MPLETED BY

## ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760 SPECIAL WASTE HAULING MANIFEST ήροςζαί

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES	195 W. BIRCH ST	r. 81593	7 8 2 7 0	0 9 1 0 5 5 0 0 0 8 <sub>G</sub>
(Company Name)  KANKAKEE		0901	Admoci III .	ILD04895595
City	State Zi	<u>-</u> .		EPA Number
		WASTE HAULER(S)		
KANKAKEE INDÚSTRIAL DISPOSAL	. 1360 E. LOCUST	of the second	1 SWH Benie	ration Number
Hauler Name	Hauler Address	0		
		8 1 5 9 3 3 2 Phone Number	931	I L D O 5 4 1 5 5 0 8 0 EPA Number
Hauler Name	Hauler Address	·	. S.W.H. Regis	tration Number
			·—— ··· · · ·	
	DECTINATION DIS	POSAL STORAGE OR TREATMEN	UT CATE	EPA Number
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & (		AL SHE	01909000
(Facility Name)	Address	V KAKA		9 1 8 0 8 9 0 2 Site Number
GRIFFITH	IN	46319 2 1 9	9244370	IND01636026
City	State	Zip	Phone Number	- EPA Number
A Continue Manage	Address	· · · · · · · · · · · · · · · · · · ·	- ,- ,	- 20
Alternate (Facility Name)	Address			39 Site Number 4
City	State	Zip	Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR		4 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
WASTE NAME:	ACETONE & CONTAM	<del></del>	WASTE PHASE:	LIQUID (Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH SHIPPING DESCRIPTION:	HAZARD CLASS	CLASSIFICATION INDICATED IF	WWEDIATELY BELOW:	(0.40.0.00000.00.0)
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WASTE ACETONE	FLAMMABLE LIQUID	D UN or NA Ni	umper	EPA HW Number
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METHOD OF SHIPMENT (Circle One) (DR	IUMS) TANK TRUC	OPEN TRUCK	OTHER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIED, DESCRI	IBED. PACKAGED. MARKED. ANI TRANSPORTATION AND I E.P.A.	D LABELED AND IS IN PROPER	CONDITION FOR TRANSPORTATION.
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WASTE HAULER	<del></del>	<u> </u>	·	
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•	9.3 34			
(2)(Authorized Signature)	·			DATE
DISPOSAL, STORAGE, OR TREATMENT FACILITY"			HAZARDOUS WASTE SUE	SUFCT TO FEE YES NO
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SOE Maush				DATE of Lot of S
(Authorized Signature)				Will the state of
COMMENTS OR SPECIAL INSTRUCTIONS.				· · · · · · · · · · · · · · · · · · ·
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IN ILLINOIS 217 / 782-3637		CY AND SPILL ASSISTANCE NU	001	SIDE ILLINOIS 800 / 424 8802 or 20? / 426-26
DISTRIBUTION PART - 1 GENERATOR PART - 2	IEPA PART - 3 SITE P	ART - 4 HAULER PART - !	SIEPA PART G - GENER	ATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760 Authorization Number SPECIAL WASTE HAULING MANIFEST 0910550008 BIRCH ST MILES LABORATORIES (Company Name) 60901 ILD04895<u>5</u>9<u>5</u> KANKAKEE IL State Zip WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST W H Registration Number Hauler Name S.W.H. Registration Number Phone Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL IN Z IND0163 • State Address Alternate (Facility Name) Site Number City Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES (m) 🗱 WASTE PHASE LICUID :WASTE NAME: (Liquid, Gaseous, Solia) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS UN1090 U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED. 0 WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL WEIGHT FOR D.O.T. USE TANK TRUCK OPEN TRUCK METHOD OF SHIPMENT (Circle One) OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF RANSPORTATION AND I.E.P. A. Dra Briber (Authorized Signature) I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS LE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE WASTE HAULER (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS Y ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675 TRIBUTION PART - 1 GENERATOR PART - 2 IEPA . PART - 3 SITE PART - 4 HAULER PART SIEPA PART 6 - GENERATOR

SITE COPY - PART 3

63 612H 2/5/52

## TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST ρ552229

Authorization Number 997149

MILES LABORATORIES	195 W. BIRCH ST.	<u>815937827</u>	
(Company Name)	Address 60901	Phone Number	Generator Number  I L D 0 4 8 9 5 5 9
KANKAKEE	State Zip		EPA Number
City		HAULER(S)	L. A. Morrido
	·		
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	a s	W.H. Registration Number 0 0 6 6 0 1
Hauler Name	Hauler Address , R 1	1 5 9 3 3 2 9 3 1	
		Phone Number	I L D O 5 4 1 5 5 0 8 C
	P	S.	W.H. Registration Number
Hauler Name	Hauler Address		32
and the majorate of the contract of the contra		Phone Number	EPA Number
The state of the s	DESTINATION - DISPOSAL	STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C & O	R.R.	9 1 8 0 8 9 0 2
(Facility Name)	Address	h(010 0 1 0 0 0 h h	•
GRIFFITH	IN L	46319 2 1 9 9 2 4 4 Zip Phone Number	370 IND0163602
City	State	Zip Fliotie Mullioei	t Number
Alternate (Facility Name)	Address	<del></del>	39 Site Number
,	i		
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR A	CETONE & CONTAMINATES	V 1 (1)	LIOUID
WASTE NAME.		WASTE PHA	SE:Calid
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SHIFFING DESCRIPTION.		UN1090	U 0 0 2
WASTE ACETONE	FLAMMABLE LIQUID	UN or NA Number	EPA HW Number
WEIGHT FOR LBS	WEIGHT FOR I.E P.A. USE MUST BE	QUANTITY OF WASTE DELIVERED 47	25000 (1 GALLONS) Jurcie One
WEIGHT FOR D.O.T. USE SCO LBS TONS (circle one)	CONVERTED TO CU. YDS. OR GAL.	OUANTITY OF WASTE DELIVERED 47	2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DR	UMS TANK TRUCK	OPEN TRUCK OTHER (Specify)	33
	Number		
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	1 / 1 / 2 - 4	MA DUNIALI	2/1-/02
			0.11
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WASTE HAULER	THE ABOVE-DESCRIBED WASTE AND QUANTIT	TV HAC BEEN ACCEPTED IN DOODED COUR	TION FOR TRANSPORT AND I ACKNOWLEDGE
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WASTE HAULER  I HEREBY CERTIFY THAT 1	THE ABOVE-DESCRIBED WASTE AND QUANTIT	TV HAC BEEN ACCEPTED IN DOODED COUR	
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WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY	THE ABOVE-DESCRIBED WASTE AND QUANTITICATED	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE G Z Z Z S E Z  DATE
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY	THE ABOVE-DESCRIBED WASTE AND QUANTITICATED	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE
I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1) (Authorized Signature)  (2) (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS Authorized Signature)	THE ABOVE-DESCRIBED WASTE AND QUANTITICATED	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE G Z Z Z S E Z  DATE
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY	THE ABOVE-DESCRIBED WASTE AND QUANTITICATED	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE G Z Z Z S E Z  DATE
I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1) (Authorized Signature)  (2) (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS Authorized Signature)	THE ABOVE-DESCRIBED WASTE AND QUANTITICATED	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE G Z Z Z S E Z  DATE
I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1) (Authorized Signature)  (2) (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS Authorized Signature)	THE ABOVE-DESCRIBED WASTE AND QUANTITION OF T	TY HAS BEEN ACCEPTED IN PROPER CONDI	DATE G Z Z Z S E Z  DATE

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

Authorization Number 997.149

•	SPECIAL WASTE H.	AULING MAINIFEST	. C. 1. 1954.
MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008
(Company Name)	Address	Phone Number	14 Generator Number 24
10-100-1012		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>
City	State ', Zip	HAULER(S)	EPA Number
	MASILI	nauctin(a)	
NKAKEE INDUSTRIAL DISPOSAL		` S.W.	H. Registration Number 0 0 6 6 0 1 2
Hauler Name	Hauler Address 8 7	159332931	110054155080
	<u>~</u> =	Phone Number	EPA Number
	***	S.W.	.H. Registration Number 32
Hauler Name	Hauter Address		32
	<del>-</del>	: Phone Number	, EPA Number
	and the second s	STORAGE OR TREATMENT SITE	01808003
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O R	· · · · · · · · · · · · · · · · · · ·	39 Site Number 4
GRIFFITH	IN) 463	319 21992443	370 IND0163602
· ···································	State 4	Zip Phone Number	EPA Number
<u> </u>			
Alternate (Facility Name)	Address	' <u>-</u>	. 39 Site Number
City	State	Zip Phone Number	, j EPA Number
TO BE COMPLETED BY WASTE GENERATOR	ACETONE S. CONTAMINATES	S	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS	ACETONE & CONTAMINATES		Uin in Constant
SHIPPING DESCRIPTION:	HAZARD CLASS:		
LIANT A OFFICE	FLAMMABLE LIQUID	<u>UN11090</u>	<u>U 0,0 2</u>
WASTE ACETONE		UN or NA Number	EFA HW Number
WEIGHT FOR LBS D.O.T. USE TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED. 47	5000 GALLONS (Circle One)
D.O.T. USETONS (circle one)	CONTENTED TO CO. TEO. CA CAL.	- ,	59
METHOD OF SHIPMENT (Circle One) (DRU	JMS) TANK TRUCK )	OPEN TRUCK OTHER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIED. DESCRIBED. PA	CKAGED, MARKED AND LABELED AND IS IN	PROPER CONDITION FOR TRANSPORTATION
<i>√</i> \	1 1000	TANALASIA	12/1/2
. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE			DATE: 0///0.2
- 1 to the section of the section of	1 3 4 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Authorized Signature)	
WASTE HAIRED	······································	#\$44	ON FOR TRANSPORT AND LACKNOWLEDGE
MACTE HAIRED	HE ABOVE DESCRIBED WASTE AND QUANTIT	#\$44	ON FOR TRANSPORT AND LACKNOWLEDGE
WASTE HAULER I HEREBY CERTIFY THAT T	HE ABOVE DESCRIBED WASTE AND QUANTIT	#\$44	ON FOR TRANSPORT AND LACKNOWLEDGE
WASTE HAULER  I HEREBY CERTIFY THAT T	HE ABOVE DESCRIBED WASTE AND QUANTIT	#\$44	ON FOR TRANSPORT AND LACKNOWLEDGE TO THE STATE OF THE STA
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Autnowed Signature)	HE ABOVE DESCRIBED WASTE AND QUANTIT	#\$44	ON FOR TRANSPORT AND LACKNOWLEDGE
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI (1)  (Authorized Signature)  (2)  (Authorized Signature)	HE ABOVE DESCRIBED WASTE AND QUANTIT	#\$44	DATE 03/01/82
I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1) (Authorized Signature)  (2) (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE 03/01/82
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  (2)  (Authorized Signature)	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE 03 011 82
WASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  (2)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE 03 011 82
(Authorized Signature)  I HEREBY CERTIFY THAT I THE DESTINATION AS INDIVIDUAL (Authorized Signature)  (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS (Authorized Signature)	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE OBJECT TO FEE YES DATE
I HEREBY CERTIFY THAT I THE DESTINATION AS INDI  (1)  (Authorized Signature)  (2)  (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY  I HEREBY CERTIPY THAT THE ABOVE DESCRIBED WAS	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE
UNASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI (1)  (Authorized Signature)  (2)  (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS (Authorized Signature)	HE ABOVE-DESCRIBED WASTE AND QUANTIT CATED	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE O 3 O II & 2  DATE VES
UNASTE HAULER  I HEREBY CERTIFY THAT I THE DESTINATION AS INDI (1)  (Authorized Signature)  (2)  (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS (Authorized Signature)	HE ABOVE-DESCRIBED WASTE AND QUANTITY CATED.  TE AND INDICATED QUANTITY HAS BEEN ACCOUNTY HE ACCOUNTY HAS BEEN ACCOUNTY HAS BEEN ACCOUNTY HAS BEEN ACCOUNTY	TY HAS BEEN ACCEPTED IN PROPER CONDITIE	DATE O 3 O II & 2  DATE VES

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

Authorization Number

MILES LABORATORIES	195 W. BI	RCH ST. 8	15937827	70 0910	550008 <sub>6</sub>
(Company Name)	Address	5	Phone Number		ator Number 24
KANKAKEE "	ΙL	60901		ILDO	4895595
City	State	Zip	· · · · · · · · · · · · · · · · · · ·	EPA I	lumber
- ,	, ,	WASTE HAULEF	(\$)		
NKAKEE INDUSTRIAL DISPOSA	L 1360 E. LO	CUST			006601
Hauler Name	Hauler Address	2031		S W H, Registration Number	000013
• .		8159		ILDO	5 4 1 5 5 0 8 C
		÷	Phone Number		EPA Number
Hauler Name	Hauler Address	<del></del> 1		S.W.H. Registration Number	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Phone Number		EPA Number
He comment to the second		ON — DISPOSAL STORAG			
AMERICAN CHEMICAL SERVICE		. & C & O R.F		9	1808902 Site Number
(Facility Name)  GRIFFITH	IN	46319	2100211	1270 115	
The one out to find a City of the	State	70319 Zip	2 1 9 9 2 4 1 Phone Number	_ <u></u> _	0 1 6 3 6 0 2 6 EPA Number
				:	
; Alternate (Facility Name)	Ac	ddress	<del></del> .:	39	Sile Number 4
Land to the state of the state		<u></u>		; <b></b> :	
City	State	12 ip	Phone Number		EPA Number 7 *
TO BE COMPLETED BY WASTE GENERATOR	ACETONE & C	ONITAMINATES		TIÓUT	
WASTE NAME:			; WASTE P	(1 invest (	Saseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH SHIPPING DESCRIPTION:	HAZARD CLASS:	II HAZAKU CLASSIFICATIO	IN INDICATED IMMEDIATELY BE	LOW:	,
Shir ind besonii nore.	TIMEAND GENOS.	-	<u>UN1090</u>	U 0 (	) 2
WASTE ACETONE	FEAMMABLE L	IQUID	UN or NA Number	EPA HW Numb	
WEIGHT FOR 40,060 TONS (circle one	WEIGHT FOR I.E P.A. CONVERTED TO CU.	. USE MUST BE YDS. OR GAL	TY OF WASTE DELIVERED:	05000	GALLONS Circle One)
METHOD OF SHIPMENT (Circle One) (DI	RUMS) C1	ANK TRUCK OPEN	TRUCK OTHER (Specify)		53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTI IN ACCORDANCE WITH THE APPLICABLE REGULATION	E ARE PROPERLY CLASSIFIE	D. BESCRIBED. PACKAGEI MENT OF TRANSPORTATIO	I. MARKED. AND LABELED AND N AND J. E. A.	IS IN PROPER CONDITION FOR	TRANSPORTATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION :	JANDIA	DONNER!	DATE:	3/8/32
	<u> </u>	// (Au	horized Signature)		
WASTE HAULER  1 HEREBY CERTIFY THAT THE DESTINATION AS IN	THE ABOVE DESCRIBED WA	STE AND QUANTITY HAS	BEEN ACCEPTED IN PROPER CO	NDITION FOR TRANSPORT AND I	ACKNOWLEDGE
1) rames R Reau	KiD Dn		e * \$	) DATE S	318183
(Authorized Signature)	70			5.	, , ,
(Authorized Signature)	<del></del>			DATE	//
					<del></del>
DISPOSAL, STORAGE, OR TREATMENT FACILITY					res NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WA	STE AND INDICATED QUANT	TITY HAS BEEN ACCEPTED	AT THE SITE SPECIFIED ABOVE		341
- I MM		and the second		DATE _	
(Authorized Signature)		<u> </u>		Ċ.	)
COMMENTS OR SPECIAL INSTRUCTIONS	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
		<u> </u>			•
IN HLLINOIS. 217 / 782-3637		EMERGENCY AND SPILL A		<del></del>	0 / 424-8802 or 20? / 426-26
DISTRIBUTION PART- 1 GENERATOR PART-	2 IEPA PART - 3 SITE	PART - 4 HAULER	PART - 5 IEPA P	ART 6 - GENERATOR	

SITE COPY - PART 3

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST <u>0552232</u>

Authorization Number 997149

		•		
MILES LABORATORIES	195 W. BIRCH ST.	8159378270	09105500	0 8 <sub>G</sub>
(Company Name)	Address	Phone Number	Generator Number	74 E O E
KANKAKEE	IL 60901	· <u> </u>	ILD04895	<u> 595</u>
City	State Zip WASTE HAL	IN EQUEN	EPA Number	
•	. AANDIE HAG	nreu(s)		
NKAKEE INDUSTRIAL DISPOSAL 13	360 E. LOCUST	S W H	. Registration Number 0 0 6 6	012
	Hauler Address		25	31
	81	5 9 3 3 2 9 3 1 Phone Number	ILD054155	0.8.0
Stranger Carlos Carlos	and on the	t. 4	EPA Number	
Hauler Name	Hauler Address	S.W.H	Registration Number	
	· · · · · · · · · · · · · · · · · · ·		Land Commence of the Commence	
		Phone Number	EPA Number	
			918089	902
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O	K.K.	9,1000 39 Site Number	<del></del>
GRIFFITH	IN 463	19 21992443		502
City	. State Zip	p Phone Number	EPA Number	
			0	
Alternate (Facility Name)	Address	<del></del>	39 Site Number	
City	State Zip	Phone Number	EPA Number	
TO BE COMPLETED BY WASTE GENERATOR ACETO	ONE & CONTAMINATES	WASTE PHASE.	LIQUID	
WEIGHT FOR 1/1 Zoo (BS)	MEIGHT FOR LE.P.A. USE MUST BE	ANTITY OF WASTE DELIVERED:	U 0 0 2  EPA HW Number  5 0 0 0 1 GALLONS 2 CU. YDS	(Circle One)
D.O.T USE 47, 400 TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUMS_	SOLVENIED TO CO. TOS ON ONE.	PEN TRUCK OTHER (Specify)	52 2 00. 105	53
	Number	· OTHER (Specily)	<del></del>	
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PRIN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	ROPERLY CLASSIFIED, DESCRIBED, PACKA	AGED, MARKED, AND LABELED AND IS IN I	PROPER CONDITION FOR TRANSPORTATION	
	le as a	10 Darwy	DATE 3/16/8	2
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	RMATION (L)	(Authorized Signature)	DATE OF TOTAL	
WASTE HAULER  DEREBY CERTIFY THAT THE ABI THE DESTINATION AS INDICATED	OVE-DESCRIBED WASTE AND QUANTITY H	HAS BEEN ACCEPTED IN PROPER CONDITION	N FOR TRANSPORT AND I ACKNOWLEDGE	
1) May Morrio			DATE 03/16	182
(1) Authorized Spiniture)			DATE 23/16	182
(2)			DATE <u>03</u> / <u>16</u> DATE/	1 8 x
(2) (Authorized Signature)		- Post 6	1 1	182 <sub>5</sub>
(2) (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY			1 1	/ EX.
(2) (Authorized Signature)	O MOICATED OUT THAT BEEN ACCEP		DATE	/ 825 NO /
(2) (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND  (Authorized Signature)	O MODICATED OUT THAT BEEN ACCEP		DATE	/ 82, No. <u>/</u>
(2) (Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND	) HUDICATED OUT THAT BEEN ACCEP		DATE	NO X
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND  (Authorized Signature)	D INDICATED OUR FILT HAS BEEN ACCEP	PIED AT THE SITE SPECIFIED ABOVE	DATE	NO NO

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0552233

Authorization Number 997149

• :	0.00	*	
MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008
. (Company Name)  KANKAKEE	Address 60901	Phone Number	Generator Number 24 I L D 0 4 8 9 5 5 9 5
City	State & Zip	<u> </u>	EPA Number
	WASTE H	AULER(S)	
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	· cwu	0066012
Hauler Name	Hauler Address	••	Registration Number 25 31
<b></b>	8 1	5 9 3 3 2 9 3 1 Phone Number	I L D 0 5 4 1 5 5 0 8 0  EPA Number
		- · · · · ·	. Registration Number
Hauler Name	Hauler Address	•••	32 34
	$\int_{\mathbb{R}^{n}} \frac{1}{n} \int_{\mathbb{R}^{n}} \frac{1}{n} \int_{\mathbb{R}$	Phone Number	EPA Number
Section Control of the Section Control of the	DESTINATION — DISPOSAL ST		
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O	<u>R.R.</u>	9 1 8 0 8 9 0 2 Site Number 4
GRIFFITH		319 21992443	70 IND01636026
City 19	State	Zip Phone Number	EPR Number
		<del></del>	
Alternate (Facility Name)	Address		39 Site Number 4
. City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR	ACETONE & CONTAMINATE	• /	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS		TASIC FIASC	(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION:	HAZARD CLASS:		
WASTE ACETONE	FLAMMABLE LIQUID	U N-1 0 9 0 UN or NA Number	U 0 0 2  EPA HW Number
,			
WEIGHT FOR LBS D.O.T. USE LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	DUANTITY OF WASTE DELIVERED: 47	50000 GALLONS (Circle One)
METHOD OF SHIPMENT (Circle One) (DRI	IMS ) TANK TRUCK	OPEN TRUCK - · OTHER (Specify)	53
	Number		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIED, DESCRIBED. PAC OF THE ILLINOIS DEPARTMENT OF TRANSPOR	KAGED, MARKED, AND LABELED AND IS IN I RTATION AND LEPP.A.	PROPER CONDITION FOR TRANSPORTATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION	12 Danber	DATE: 3/25/82
		(Authorized Signature)	
WASTE HAULER  HEREBY CERTIFY THAT T	HE ABOVE-DESCRIBED WASTE AND QUANTITY CATED:	HAS BEEN ACCEPTED IN PROPER COMDITION	FOR TRANSPORT AND LACKNOWLEDGE .
1 / / / / / / / / / / / / / / / / / / /			20
(1) MW (Authorizeq & signature)	<del></del>	<b>`~</b>	DATE <u>03</u> 25 62
(2)	· ·	,	DATE:
(Authorized Signature)	<del></del>		
DISPOSAL, STORAGE, OR TREATMENT FACILITY	<del></del>	HAZARDOUS WAS	TE SUBJECT TO FEE YES NO NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	TE AND INDICATED QUANTITY HAS BEEN ACC		774.73
(Authorized Signature)	<u> </u>	.*	DATE
(Automized Signature)			ου <i>γ</i> · · · · · · · · · · · · · · · · · · ·
COMMENTS OR SPECIAL INSTRUCTIONS.	·		
IN (LLINOIS, 217 / 782-3637	*24 HOUR EMERGENCY AND S	PILL-ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS 800 / 424-8802 or 20? / 426-26
DISTRIBUTION PART - 1 GENERATOR PART - 21	EPA PART - 3 SITE PART - 4 HA	AULER PART - 5 IEPA PART 6	GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

<u>0552234</u>

Authorization Number 997149

8 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 MILES LABORATORIES 195 W. BIRCH ST. (Company Name) KANKAKEE 60901 IL State WASTE HAULER(S) 1360 E. LOCUST KANKAKEE INDISTRIAL DISPOSAL S.W.H. Registration Number \_\_\_\_ 0 0 6 6 0 1 \$ Hauler Address 8 1 5 9 3 3 2 9 3 1 Phone Number ILD054155080 S.W.H. Registration Number Hauler Address Hauler Name Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 7.7 <u>\_9180890</u> AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. (Facility Name) GRIFFITH IN 19924 INDO16360 State City Address Alternate (Facility Name) Site Number . State Zip Phone Number City EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE PHASE: WASTE NAME: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: HAZARD CLASS: SHIPPING DESCRIPTION: UN OF NA Number EPA HW Number WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED 005000 WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 1 GALLONS Circle One) WEIGHT FOR D.O.T. USE TANK TRUCK **OPEN TRUCK** METHOD OF SHIPMENT (Circle One) (DRUMS OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEFA. Darber I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED DATE: 04 081 82 ionature (2) 🚉 (Authorized Signature) DISPOSAL. STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE YES. I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED &T THE SITE SPECIFIED ABOVE 3 (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 20? / 426-2675 DISTRIBUTION PART - 1 GENERATOR PART - 3 SITE PART - 2 IFPA PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES	195 W. BIRC	H ST. 8	15 <u>937827</u>	0 1 0 5 5 0 0 8 6
(Company Name) <b>KANKAKE</b> E	Address	60000	Filone Number	
City	State ·	60901 - Zip		I L D O 4 8 9 5 5 9 5
		WASTE HAULER	(\$)	
ANKAKEE INDUSTRIAL DUSPOSAL	1360 E. LO	CUST 3 12 7	~ · · · · · · · · · · · · · · · · · · ·	W.H. Registration Number 0 0 6 6 0 1 2
Hauler Name	. Hauler Address	87.50		25, 31
			3 3 2 9 3 1 Phone Number	I L D\0 5 4/-1 5 5'0 8 0
			· s	S.W.H. Registration Number
Hauler Name	Hauler Adoress	114	T. a.	32 38
			Phone Number	EPA Number
AMERICAL CIPATON CERVICE		TIDISPOSAL STORAGE	1 4 5	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE.		<u>•</u>	9 1 8 0 8 9 0 2 Site Number 46
GRIFFITH	IN	46319	2199244	370 IND01636026
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Add		_	39 Site Number 44
		: 	_ · <u></u>	
TO BE COMPLETED BY	State	Zip	Phone Number	EPA Number
WART BENERATOR	ACETONE & CONT	TAMINATES	WASTE PH	ASE LIOUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS	MANIFEST IS OF THE DOT	HAZARO CLASSIFICATIO		Olivate Corner of Corner
SHIPPING DESCRIPTION	HAZARD CLASS:		UN1090	
WASTE ACETONE	FLAMMABLE LI	IQUID	UN or NA Number	U 0 0 2 EPA HW Number
WEIGHT FOR 39, COX LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUI	WEIGHT FOR I.E.P.A. L CONVERTED TO CU. YE  MS	ISE MUST BE QUANTIT	TRUCK OTHER (Specify)	05000 (1 GALLONS Y Curcle One) 52 (3 GALLONS Y Curcle One) 53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A	RE PROPERLY CLASSIFIED.	DESCRIBED, PACKAGED	. Marked, and labeled and is	S IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	. (	ENT OF TRANSPORTATION	NAND I.E. BA.	1/1//2
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	Auti	norized Signature)	DATE: 4/16/02
WASTE HAULER / LHERERY CERTIEY THAT TH	E ABOVE DESCRIBED WAS	E AND QUANTITY HAS E	EEN ACCEPTED IN PROPER CONF	DITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDIC		*		***************************************
in Wellard Mu	lla	$\mathcal{F}_{i} = \mathcal{F}_{i} = \mathcal{F}_{i}$	X 3	DATE 04/1/61 8
(Authorized Signature)			•	54
(2) (Authorized Signature)	<del></del>	er era		. DATE
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		<del></del>		
	E AND INDICATED QUANTIT	Y HAS BEEN ACCEPTED	HAZARDOUS AT THE SITE SPECIFIED ABOVE	WASTE SUBJECT TO FEE YES NO
A bullo	' <i>a</i>			DATE TO THE STATE OF THE STATE
(Authority Street All All All All All All All All All Al				
COMMENTS OR SPECIAL INSTRUCTIONS		<del></del>		
·	· .			
	*24 HOUR F/	MERGENCY AND SPILL AS	SSISTANCE NUMBERS	
IN ILLINOIS 217 / 782-3637  DISTRIBUTION PART - 1 GENERATOR PART - 2 IE		PART - 4 HAULER		OUTSIDE ILLITIOIS 800 / 424-8802 or 202 / 426 263 R1 6 - GENERATOR
PEV-#3	PY - PART 3	$\tau_{o}$	100KT-63	SPU 4.16.82

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

DIVISION OF LAND POLLUTION CONTROL

	<b>'-</b> ,	82-6760 AULING MANIFEST	Authorization Number 997149
MILES LABORATORIES	195 W. BIRCH ST.	8159378270	0910550008

Address Generator Number (Company Name) Phone Number 60901 KANKAKEE IL ILD0489559 EPA Number State 710 City WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 7 S.W.H. Registration Number \_\_\_\_\_\_ 0 0 6 6 0 1 Hauler Address Hauler Name 3 3 2 9 3 1 S.W H. Registration Number Hauler Address Hauler Name Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE COLFAX AVE. & C & O R.R. 9 1 8 0 8 9 0 CHEMICAL SERVICE (Facility Name) GRIFFITH 9 2 <u>NDO163</u> Address Alternate (Facility Name) Site Number City State Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIOUID WASTE NAME: WASTE PHASE: (Liquid Gaseous Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: HAZARD CLASS SHIPPING DESCRIPTION: U N 1 0 9 0 U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID WEIGHT FOR I E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 00 0 50 00 WEIGHT FOR TONS (circle one) D.O.T. USE METHOD OF SHIPMENT (Circle One) (DRUMS, TANK TRUCK **OPEN TRUCK** OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. MARKED. AND CABELED AND IS IN PROPER CONDITION FOR TBANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF RANSPORTATION AND I.E P.A. 1 I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY - **- (**) HAZARDOUS WASTE SUBJECT TO FEE AUD INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE I HEREBY CERTIFY THAT TH (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-880? or 20? / 426-2675

PART - 4 HAULER

SITE COPY - PART 3

PART - 2 IFPA

DISTRIBUTION PART - 1 GENERATOR

PART - 3 SITE

63 6PM 4.26.82

PART 6 - CENERATOR

PART - 5 IEPA

# COMPLETED BY

## STATE OF ILLINOIS

ENVIRONMENTAL PRQTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 0552237

Authorization Number 997149

	SPECI	AL WASTE HA	ULING MANIFEST		В	13
MILES LABORATORIES	195 W. B	IRCH ST.	81593782		0550008	8 <u>c</u>
(Company Name) KANKAKEE	Address IL	60901	Phone Number		Generator Number	9 5 S
City	State	Zıp	· 55		EPA Number	
	<del></del>	WASTE H	AULER(S)	<del> </del>	<del></del>	
CANKAKEE INDUSTRIAL DISPOSAL	1360 E. LO	CUST		C.W. U. Bogistration Number	er 0 0 6 6 0	1 2
Hauler Name	Hauler Address			3.W.n. negistration Numb	25	31
:		81	5 9 3 3 2 9 3 1 Phone Number	ILD	0 5 4 1 5 5 I	<u>8</u> 0
•	<u> </u>	1%	and the second	S.W.H. Registration Numb	er	
Hauler Name	Hauler Address		v.		<b>3</b> 2	38
المحافظ والمستنفي والمستنف والمستنف والمستنف والمارات			Phone Number		EPA Number	
	DESTINATIO	N — DISPOSAL SI	ORAGE OR TREATMENT SITE			
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE	ECE (	) R.R.	>	9 1 8 0 8 9	0 2
GRIFFITH	IN	46	319 2199244	370 IND	016360	2 6 F
City	State	· ·	Zip Phone Number		. EPA Number	
	** ** **	L grand	<u>.                                    </u>		1 1	:
Alternate (Facility Name)	Add	iress		- 3s	Site Number	40
City	State		ip Phone Number		'EPA Number	
TO BE COMPLETED BY WASTE GENERATOR WASTE NAME:	ACETONE & CO	TANIMATK	ES WASTE F	DHVCE.	.IOUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS	MANIFEST IS OF THE DOT	HAZARD CLASSIF		01.5	uid. Gaseous. Solio)	
SHIPPING DESCRIPTION:	HAZARO CLASS.					
A	E1 414451 E 1	TOUTD	<u> </u>		002	
WASIKE ACETONE	FLAMMABLE L	10010	UN or NA Number	: EPA HW	Number	
WEIGHT FOR LBS D.O.T. USETONS (circle one)	WEIGHT FOR I E.P.A. CONVERTED TO CU. Y	USE MUST BE DS: OR GAL.	UANTITY OF WASTE DELIVERED: 47	05000	1 GALLONS Circles 2 CU VISS 1	
METHOD OF SHIPMENT (Circle One) (DRU	MS) TA	ANK TRUCK	OPEN TRUCK OTHER (Specify)			53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE	ARE PROPERLY CLASSIFIED	. DESCRIBED, PAC	KAGED, MARKED, AND LABELED AND	IS IN PROPER CONDITION	FOR TRANSPORTATION	
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS :	OF THE ILLINOIS DEPARTM	IENT OF TRANSPOR		11	5/2/82	2
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	I INFORMATION	<u> </u>	(Authorized Signature)	DATE	$\frac{0/3/\sqrt{2}}{2}$	
WASTE HAULER						
THE DESTINATION AS INDIC	HE ABOVE-DESCRIBED WAS CATED.	TE AND QUANTITY	HAS BEEN ACCEPTED IN PROPER CO	NDITION FOR TRANSPORT	AND I ACKNOWLEDGE	
11) The orbis		:		DA	45/03/2	1Z
- [Authorized Signature]					1 /	59
(Authorized Signature)		<del>`</del> †	( · · · · · · · · · · · · · · · · · · ·	DA:	E	
DISPOSAL, STORAGE, OR TREATMENT FACILITY	*	7	: HAZARDO	US WASTE SUBJECT TO FE	E YES NO	X
الكر وي فر فر الله الله الله الله الله الله الله الل	See and	IY HAS BEEN ACC	EPTED AT THE SITE SPECIFIED ABOVE			6 3
(Authorized Signature)				DA	IE 55 / 5	65
COMMENTS OR SPECIAL INSTRUCTIONS						
		····				
	*24 HOUR F	MERGENCY AND S	PILL ASSISTANCE NUMBERS*	<del></del>		
IN ILLIMOIS, 217 / 782-3637 DISTRIBUTION PART 1 GENERATOR PART - 21		PART - 4 HA	<del></del>	OUTSIDE ILLINOI PART 6 - GENERATOR	S 800 / 424 8802 or 202 /	420-2675
REV # 3					<del></del>	

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

<u>0552238</u>

Authorization Number \_\_\_\_\_ 9 9 7 1 4 9

MILES LABORATORIES	195 W. BIF	CH ST.	81593782	70 0	9105500	0 8 0
(Company Name)  KANKAKEE	Address IL	60901	Phone Number	14 T	Generator Number	5 Q 5
City	State	Zip			EPA Number	
			IAULER(S)	<del> </del>		
ANKAKEE INDUSTRIAL DISPOSAL	1360 E. I	OCUST			: 006	601
Hauler Name	Hauler Address			* S.W.H. Registratio	n Number	
		8 1		_ <u>I</u>	LD0541	<u>5 5 0 8</u>
			Phone Number	S.W.H. Registratio	EPA Number	
Hauler Name	Hauler Address	<del></del>		o.w.n. negistratio	32 -	
		· —-	Phone Number		EPA Number	
e de seguine de la companya de la c	DESTINATIO	N —. DISPOSAL S	TORAGE OR TREATMENT SITE		40	
AMERICAN CHEMICAL SERVICE	COLFAX AVE	. & C & O	R.R.		9180	<u>8902</u>
(Facility Name)  GRIFFITH	IN	jiess Jiess	ו ע כ ס ס ר כ י סוב	t 270 1	ND0163	 6026
City	State		319 2 1 9 9 2 4 Zip Phone Number	1 3 1 0 1	EPA Number	0020
·		· :				
Alternate (Facility Name)	Ade	iress			39 Site Num	be:
City	State		Zip Phone Numbe	ir	EPA Number	
TO BE COMPLETED BY WASTE GENERATOR	CETONE & CON	CAMINATEC	1 2 mily 1 1 1 1		LIOUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS			WASTE FICATION INDICATED IMMEDIATELY E  UN 1 0 9 0		(Liquid, Gaseous, Solid)	
WASTE ACETONE	FLAM1ABLE	LIQUID	UN or NA Number		PA HW Number	
WEIGHT FOR 39, 160 (LBS) (Circle one)	WEIGHT FOR I.E.P.A. CONVERTED TO CU. Y		DUANTITY OF WASTE DELIVERED: 47	1050	0 0 GALLOI	VS (Circle One)
METHOD OF SHIPMENT (Circle One) (DRUN	Number )	ANK TRUCK	OPEN TRUCK OTHER (Specify	r)	<del> </del>	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE AF IN ACCORDANCE WITH THE APPLICABLE REGULATIONS O	RE PROPERLY CLASSIFIED F THE ILLINOIS DEPARTM	DESCRIBED. PAG	CKAGED. MARKED, AND LABELED AN	D IS IN PROPER COM	IDITION FOR TRANSPORTATI	ON.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	JONES.	(Authorized Signature)		DATE 0/23/	مكنه الإ
WASTE HAULER /					·	
THE DESTINATION AS INDICA	ABOVE DESCRIBED WAS	TE AND QUANTITY	' HAS BEEN ACCEPTED IN PROPER CI	ONDITION FOR TRAN	_	
(1) MANUAL Standard (Authorized Signature)	all s		\$ 1 p < 0	· 'Y .	DATE S4	I Z.
(2)(Authorized Signature)	<del></del> .				DATE:	/
DISPOSAL. STORAGE. OR TREATMENT FACILITY*			HAZARDO	DUS WASTE SUBJEC	T TO FEE YES	NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE	AND-INDICATED QUANTI	TY HAS BEEN ACC	EPTED AT THE SITE SPECIFIED ABOV	/E	-r -	
(Authorized Signature)	<u> </u>				DATE 60	
COMMENTS OR SPECIAL INSTRUCTIONS						
IN ILLINOIS 217 / 782-3637		·	PILL ASSISTANCE NUMBERS		ILLINOIS 800 / 424-8802 c	r 20? / 426-20
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEI	PART - 3 SITE	PART - 4 H	AULER PART - 5 IEPA	PART 6 - GENERATOI	<del></del>	

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

0552239

	,					•
Authorization Number	9	9	7	1	4	ç
tutnung ation mulituer						_
						1.7

MILES LABORATORIES	195 W. BII	RCH ST.	8159378270	0910550008 G
(Company Name)  KANKAKEE	Addres:	60901	Phone Number	Generator Number 24
City	State	Zip		I L D 0 4 8 9 5 5 9 5 9 FA Number
dity			HAULER(S)	E A Nombe.
ANKAKEE INDUSTRIAL DISPOSAL	. 1360 E. LO	NUCT I		
Hauler Name	Hauler Address	<del>~~~</del>	's.w'h.	Registration Number 0 0 6 6 0 1 2
nauter Name	Tiddict Address	8 1	59332931	ILD05415508
	•	- ;	Phone Number	EPA Number
Hauler Name	Hauler Address		- S.W.H.	Registration Number
nauer Hane	Tibble Field			
·			Phone Number	EPA Number
			TORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE	Idress	D.R.R.	39 9 1 8 0 8 9 0 2 Site Number
GRIFFITH	IN		בולוכם סיכ סודאו	70 IND01636026
City	State		46319 2 1 9 9 2 4 4 3 1 Zip Phone Number	EPA Number
·	- and	~.;	<u> </u>	( )
Alternate (Facility Name)	. Ac	ldress		39 Site Number 46
City	State		Zip Phone Number	EPA Number
TO BE COMPLETED BY		, vi	, <u>\</u> .	
WASTE GENERATOR WASTE NAME:	ACETONE &	<u> ANÍMATÍNO</u>	TES WASTE PHASE _	LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THI		T HAZARD CLASSI	FICATION INDICATED IMMEDIATELY BELOW	(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION	HAZARD CLASS.		11 N 7 O O O	11 0 0 0
WASTE ACETONE	FLAMMABLE L	IQUID	U N 1 0 9 0	U 0 0 2 EPA HW Number
WEIGHT FOR 40, 080 (BS) D.O.T. USE 40, 080 (Circle one)	WEIGHT FOR I.E.P.A. CONVERTED TO CU.		DUANTITY OF WASTE DELIVERED:	5000 (1 GALLONS) Circle One)
	JMS) (	ANK TRUCK	OPEN TRUCK OTHER (Specify)	52 53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE	Number ARE PROPERLY CLASSIEIE	D/DESCRIBED PAI	CKACEU WARKED AND LABELED AND IS IN O	DOCED CONDITION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPART	VENT OF TRANSPO	RTATION AND JEP.A	NOTER CONDITION FOR THANSPORTATION
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION	J'MD	IN SUNDIN	DATE 4/2/82
<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		(Authorized Signature)	
WASTE HAULER / I HEREBY CERTIFY THAT T	HE ABOVE-DESCRIBED WA	STE AND QUANTIT	Y HAS BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE
Kinding O San	00			
(1) MERCINA FFL	aca .	56b . \$		DATE <u>061 02</u> 1 82
(Authorized Signature)	. 4	in the		21 . 24
(2)(Authorized Signature)				GATE:
DISPOSAL STORAGE OR TREATMENT ACILITY	0		W 3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
I HEREBY CERTIFY THAT HE ABOVE DESCRIBED WY	TE AND INDICATED QUANT	ITY HAS BEEN ACC	HAZAHDOUS WAS EPTED AT THE SITE SPECIFIED ABOVE.	TE SUBJECT TO FEE VES NO
Mille				6702
(Authorized Signature)				DATE
COMMENTS OR SPECIAL INSTRUCTIONS.				
Sometris on Silenz instructions.		- ^ •		
IN ILLIMOIS 217 / 782-3637	*24 HOUR	EMERGENCY AND	SPILL ASSISTANCE NUMBERS"	OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-267
DISTRIBUTION PART - 1 CENERATOR PART - 2	IEPA PART - 3 SITE	PAR1 - 4 H	AULER PART - 5 IEPA PART 6 - 1	GENERATOR

# WASTE GENERATOR

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

<u>0552240</u>

MILES LABORATORIES	195 W. B	IRCH ST.	8159	37827	0 09	10550	0 0 8 <sub>G</sub>
(Company Name)	Addres		Pn	one Number	14	Generator Number	24
KANKAKEE	IL	60901			I L	D 0 4 8 9	<u> 5595</u>
City	State	Zip			<u> </u>	EPA Number	
	_		HAULER(S)	•			
KANKAKEE INDUSTRIAL DISPOSAL		LOCUST	•	. S.W	/ H. Registration Num	ber0 0 6	66012
Hauler Name	Hauler Address	78	5023	2037	ri . '	25	5508
			Phone Num	ber J J =		EPA Number	<u> </u>
		<u> 1.77.</u>		S.V	V.H. Registration Num	iber _	
Hauler Name	Hauler Address					32	3
		· • • • • • • • • • • • • • • • • • • •	Phone Nun			EPA Number	,~ <u>~</u> ,
	S's DESTINAT	ION - DISPOSAL S	TORAGE OR TREA	MENT SITE	e in Arminia	in the state of	- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
AMERICAN CHEMICAL SERVICE	COLFAX AV		<u> 0 R.R. 💮</u>			9180	<u>8902</u>
(Facility Name)		odress	220 0 2			Site Nur	mber · 4
GRIFFITH	State		319 2 1 Zip	9 9 2 4 4 3	<u>7 0 1 N :</u>	D 0 1 6 3 EPA Number	6026
والمراب والمحكونية فالمحافظة والمحافظة والمحاف	الكام المواصوران وما		- A-4	· · · · · · · · · · · · · · · · · · ·			
. Alternate (Facility Name)	A	ddress	<del>- : -</del>			Site Nu	mber 4
:			7'-		<u></u> _		- <del></del>
TO BE COMPLETED BY	State		Zip	Phone Number		EPA Number	<del></del>
WASTE GENERATOR	ACETONE & CO	•	S	I	· · · · · · · · · · · · · · · · · · ·	LIOUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS				WASTE PHAS ED IMMEDIATELY BELOV	(1	iquid, Gaseous, Solid	d)
SHIPPING DESCRIPTION	HAZARD CLASS:	.,					
MASTE ACETONE	ELAMMADIE I	TOUTO		1 0 9 0		0 0 2 Number	
WASTE ACETONE	FLAMMABLE L	<del></del>					
WEIGHT FOR 3993 WIBS	WEIGHT FOR LE P.A CONVERTED TO CU	I. ÖSE MUST BE	DUANTITY OF WAS	STE DELIVERED: Q	500	O GALLI	ONSY Circle One)
D.O.T. USETONS (circle one)	. CONVENTED TO CO.	TOO. ON GAL.		47		52	53
METHOD OF SHIPMENT (Circle One) . (DRUM	AS)	TANK TRUCK	OPEN TRUCK	OTHER (Specify)	<del></del>		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A	RE PROPERLY CLASSIFIE	D. DESCRIBED, PA	CKAGED, MARKED	. AND LABELED AND IS	N PROPER CONDITION	N FOR TRANSPORTA	TION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS C	F THE ILLINOIS DEPART	MENT OF TRANSPO	RTATION AND I.E.	9/A.		1/1/1/	83
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	JENL	(Authorized Sig	nature)	DAT	E <u>0//0/</u> 0	ملی ا
WASTE HAULER							
I HEREBY CERTIFY THAT THE DESTINATION AS INDICA	TED. TED.	721E AND ODANIII.	Y HAS BEEN ACCE	PIED IN PROPER CONDIT	ION FOR TRANSPORT	AND I ACKNOWLED	)ÜE .
Filling 521	10.	-				11/11	11 6
(Authorized Signature)	ta	4.4	No.		<i>(_9/</i>	LIE CO /	
(2)		• .			. /· / nu	ATE /	/
(Authorized Signature)	<del></del>				0,	.,,,,	
DISPOSAL, STORAGE, OR TREATMENT FACILITY	1			HAZARDOUS V	VASTE SUBJECT TO F	FE YES	N8 /
I HEREBY CERTIFY THAT THE ABOVE OF LAURED WAS HE	A MOICATED CHANT	TITY HAS BEEN AC	EPTED AT THE ST	TE SPECIFIED ABOVE		/	10/6
				2	 D	ATE:	40
(Authorized Signatule)						60	
COMMENTS OR SPECIAL INSTRUCTIONS.		<del> · · · ·</del>		•			
		. <u> </u>			·· -— <del></del>		
		FMEDOCA CO.					
IN ILLINOIS: 217 / 782 3637  DISTRIBUTION PART 1 GENERATOR PART 2 IE		EMERGENCY AND				DIS 800 / 424-8802	or 20? / 426-26
REV # 3	n rani-33iit	PART 4 H	MULEN PA	RT - 5 IEPA PART	6 - GENERATOR	1 / 101	· -

6/082

#### IL 532-610 LPC 62-8/81

TO BE COMPLETED BY WASTE GENERATOR

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

Authorization Number \_\_\_\_\_ 9 9 7 1 4 9

SPECIAL WASTE HAULING MANIFEST

0634186

MILES LABORATORIES	195 W. BIR	CH ST.	81593	378270	09105	50008
(Company Name)  KANKAKEE	Address	60901	Phone	Number 1		or Number
	State	Zip			ILDO4	
City	State	WASTE HA	ULER(S)	<u>-</u>	EFA NO	midei
•	•		رة			
KANKAKEE INDUSTRIAL DISPOSAL		UST .	-74	S.W.H. Re	egistration Number	006601
Hauler Name	Hauler Address	8 1	59332			415508
	the second		Phone Number	<del>2_4_</del>	12000	A Number
<u> </u>		<u> </u>	*.	S.W.H. R	egistration Number	
Hauler Name	Hauler Address					
			Phone Number	<del></del>	E	PA Number :
	DESTINATION	N — DISPOSAL STO	RAGE OR TREATME	NT SITE		
AMERICAN CHEMICAL SERVICE	COLFAX AVE		R.R.			<u> 180890</u>
(Facility Name)  GRIFFITH	in Add	ress 463	סוכ מו	0011107	O INDO	Site Number
City	State	Z <sub>1</sub>		Phone Number	· · · · · · · · · · · · · · · · · · ·	163602 PA Number
			7			•
Alternate (Facility Name)	Add	ress	<del></del>		39	Site Number
City	State	Zij	<del></del>	Phone Number	·	PA Number
TO BE COMPLETED BY	Since .	21		Phone Number	L	
WASTE GENERATOR WASTE NAME:	ACETONE & C	ONTAMINAT	Es 🥇	WASTE PHASE	<u>}_</u>	IOUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS	MANIFEST IS OF THE DOT	HAZARO CLASSIFIC	CATION INDICATED I		(Liquid, Ga	seous. Solid)
SHIPPING DESCRIPTION:	HAZARD CLASS:		ณ์ พ.ว	L 0 9 0		2
WASTE ACETONE	FLAMMABLE L	IQUID	UN or NA N		EPA HW Number	
WEIGHT FOR 39, EEOBS (circle one)	WEIGHT FOR I.E.P.A. L		ANTITY OF WASTE	DELIVERED: 0 0	5000	GALLONS Circle Or 2 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRU	MS) (A	NK TRUCK	PEN TRUCK	OTHER (Specify)		53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	RE PROPERLY CLASSIFIED.	DESCRIBED, PACK	AGED, MARKED, AN	LABELED AND IS IN PRO	PER CONDITION FOR TE	ANSPORTATION
		ENT OF THANSPORT	/ .	raled -	/	111/82
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	11	(Authorized Signatu		DATE:	<del></del>
WASTE HAULER / I HEREBY CERTIFY THAT THE DESTINATION AS INDIC		TE AND QUANTITY I	HAS BEEN ACCEPTE	D IN PROPER CONDITION F	OR TRANSPORT AND I A	CKNOWLEDGE
(Authorized Signature)	iller.	a <sup>b</sup>		· .	DATE: 54	111 5
(2)(Authorized Signature)			R .		DATE	
DISPOSAL, STORAGE, OR TREATMENT FACILITY"	1	. =-	5,63	HAZARDOUS WASTE	SUBJECT TO FEE YE	SS
I HEREBY CERTIFY THAT THE ABOVE OF SCRIBED WAS	AND INDICATED QUANTIT	Y HAS BEEN ACCE	PHED AT THE SITE S			. , , , ,
(Authorited Signature)			1 Pro		DATE	
COMMENTS OR SPECIAL INSTRUCTIONS:						
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IN ILLINOIS 217 / 782-3637			PILL ASSISTANCE N			/ 424-8802 or 202 / 426
DISTRIBUTION PART - 1 GENERATOR PART - 2 IE	PART - 3 SHE	PART - 4 HAL	ILER PART	5 IEPA PART 6 - GE	NERATOR	<del> </del>

REV # 4

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 <u>0634187</u>-

Authorization Number 997149

SPECIAL WASTE HAULING MANIFEST 195 W. BIREH ST. 8 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 MILES LABORATORIES (Company Name) KANKAKEE 60901 I L D O 4 8 9 5 5 9 5 9 WASTE HAULER(S) 1360 E. LOCUST KANKAKEE INDUSTRIAL DISPOSAL S.W.H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 Hauler Address 59332931 S.W.H. Registration Number Hauler Address Hauler Name DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE : AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. (Facility Name) 2199244370 IND01636026 GRIFFITH IN City Address Alternate (Facility Name) Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE PHASE: THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid) SHIPPING DESCRIPTION UN1090 U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED: 005000 GALLONS (Dircle One) WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR CONVERTED TO CU. YDS. OR GAL. ONS (circle one) DOT USE METHOD OF SHIPMENT (Circle One) ZANK TRUCK OPEN TRUCK (DRUMS\_ OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.B. A. MAGCA I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULEB I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINAT ON AS INDICATED. (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY - HAZARDOUS WASTE SUBJECT TO FEE AROVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE COMMENTS OR SPECIAL INSTRUCTIONS 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* IN ILLINOIS 217 / 782 3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675 DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - SIEPA PART 6 - GENERATOR

## IL 532-610 LPC 62-8/81

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLITITION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

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atınn	Number	-937	7		-9-

MILES LABORATORIES (Company Name)	195 W. B		8 1 5 9 Phone	3 7 8 2 7 0 Number	0 9 1 0 5 5 Generator Num	
. KANKAKEE	IL	60901		<u>-</u> ۰ ۲	ILD 048	95595
City	State	Zip 🗼			. EPA Number	
		WASTEN	HAULTUS)	No. 3 Programme	1	
AKEE INDUSTRIAL DISBOSAL	1360 E. LO	CUST		S.W.H. F	Registration NumberO_	<u>06601</u>
Hayler Name	Hauler Address	Q	1 5 0 2 2 2			
		<u> </u>	Phone Number	ــــــــــــــــــــــــــــــــــــــ	I L D O 5 4	
				S.W.H. 1	Registration Number	
Hauler Name	Hauler Address	$\mathcal{F}_{i}$				
	et del la qui est		2. Phone Number		EPA Nurr	iber :
	DESTIN	Same Santa Carlo	TORAGE OR TREATME	NT SITE		
AMERICAN CHEMICAL SERVICE (Facility Name)	E COLFAX	AVE: & C &	O.R.R.		39 Site	0890 Number
GRIFFITH	IN	<u> </u>	6319 2 1	992443	7 0 I N D O 1	<u>63602</u>
City .	State		Zip	Phone Number	EPA Num	ber
Alternate (Facility Name)		Address			. 39 Site	Number
Michiga (Laury) (rama)			7,		•	*.
City	State		Zip	Phone Number	EPA Num	ber
BE COMPLETED BY ASTE GENERATOR	ACETONE	IMATINED 3	VATES:	WASTE DIRACE.	LIOUT	~ <b>Ţ</b> .
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SHIPPING DESCRIPTION:	HAZARD CLASS:		ŧ .	:		
WASTE ACETONE	FLAMMABLI	E LIQUID	<u>U N 1</u>	090	<u>U_0_0_2</u> EPA HW Number	
1 - 6	WEIGHT 500 1 5 6	P.A. USE MUST BE		00	5000 C	ALLONS (Bircle On
CIGHT FOR 40, 600 TONS (circle o	CONVERTED TO C		QUANTITY OF WASTE	DELIYERED 47		0. YOS. <u>1</u>
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IEREBY AGREE TO AND CERTIFY THE ABOVE WRI	TTEN INFORMATION	Jens	(Authorized Signati	MASCO 1980	DATE:	0/02
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(Authorized Agnature)	<del></del>			2 2 4	DATE:	10 2
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SPOSAL, STORAGE, OR TREATMENT FACILITY	$\wedge$ 1			HAZARDOUS WAST	E SUBJECT TO FEE YES	> /×
HEREBY CERTIFY THAT THE ABOVE DESCRIBED Y	VASTE AND INC. ATED OU	NTITY HAS BEEN AC	CEPTED AT THE SITE !	SPECIFIED ABOVE:		16
(Authorized Signature)	unyell		. + <b>‡</b> *		DATE:	/`
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OMMENTS OR SPECIAL INSTRUCTIONS:			*			
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ILLINOIS 217 / 782-3637	*24 H	OUR EMERGENCY AND	D SPILL ASSISTANCE	NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-	3802 or 202 / 426
10111012 511 / 105-2021					001311/2 12[14013 000 / 474 1	

IL 532-610 LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782 3637

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760 Authorization Number SPECIAL WASTE HAULING MANIFEST 159378270 0910550008 MILES LABORATORIES (Company Name) KANKAKEE 60901 <u>1 L D O 4 8 9 5 5 9 5 9</u> 11 Zıp City WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 ILD 0 5 4 1 5 5 0 8 0 S.W.H. Registration Number Hauler Name Hauler Address EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. S C S O R.R. 9180890 (Facility Name) GRIFFITH IN Alternate (Facility Name) Address Site Number Zip - Phone Number . City State EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE PHASE: WASTE NAME: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS. UN1090 U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID UN or NA Number EPA HW Number QUANTITY OF WASTE DELIVERED. 0 WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR CONVERTED TO CU YDS. OR GAL TANK TRUCK OPEN TRUCK METHOD OF SHIPMENT (Circle One) OTHER (Specify) \_ THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED. MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEVEL. MOTA WURLE I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE 8/23/82 (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE YES IBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE I HEREBY CERTIFY TH

DISTRIBUTION PART I GENERATOR PART - 3 SITE PARI 6 GENERATOR PART - 2 IEPA PART - 4 HAULER PART - 5 IEPA SITE COPY - PART 3

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802 or 207 / 426-2675

WASTE GENERATOR		POLLUTION AGENCY POLLUTION CONTROL .		<b>NONATA</b>
	2200 CHURCHILL ROAD, S	SPRINGFIELD, ILLINOIS 627		
; · · ·	•	782-6760 HAULING MANIFEST	Authorization Nur	nber
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MILES LABORATORIES	195 W. BIRCH ST!		270 091	0 5 5 0 0 0 8 G
(Company Name)	Address	Phone Number	*	
KANKAKEE	IL 60901	- 42 -	<u> ILDO</u>	48955959
Спу	State Zip	HAULEN(S)	tr	A Number
	WASTE CO.	- HAULENS)		
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST 😷		S.W.H. Registration Number	10066012
Hauler Name	Hauler Address			25 31
	<u>.</u>	15933293 Phone Number	7 <u>I T D O</u>	5 4 1 5 5 0 8 0
			S.W.H. Registration Number	
Hauler Name	Hauler Address		5.W.n. negistration number	32 38
	DESTINATION DISPOSAL	STORAGE OR TREATMENT SITE		EPA Number
AMERICAN CHEMICAL SERVICE	COLFAX AVE. & C	tan arang a dalam at a salah sal		
ಪ್ರಕರ್ಣನಾಗುವುದಾ(Facility Name) ಕೈ ಅಂದಿನ ಗಾಗುತ್ತಗಳು		73X-X	39	9 1 8 0 8 9 0 2 Site Number
GRIFFITH	IN I	6319 2 1 9 9 2	44370 IND	01636026
City	State	Zip Phone Nu		EPA Number
			·	
Alternate (Facility Name)	Address .		39	Site Number 46
City	State	Zip - Phone Nu	mber	EPA Number
TO BE COMPLETED BY				<del></del>
WEIGHT FOR 4/1700 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUM	Number	OUANTITY OF WASTE DELIVERED  OPEN TRUCK OTHER (Sp	ecity)	1 GALLONS (Direle One) 2 CO. 705. 1 53
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE AF IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF	E PROPERLY CLASSIFIED, DESCRIBED, P THE ILLINOIS DEPARTMENT OF TRANS	ACKAGED MARKED, AND LABELED PORTATION AND LE PA	AND IS IN PROPER CONDITION FO	R TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	1/201	Socia Desche	DATE:_	0.400.400
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THE DESTINATION AS INDICA		THAS BEEN ACCEPTED IN PROPE	H CONDITION FOR THANSPORT AN	D   ACKNOWLEDGE
That the Ris	`.	a de la companya de l		08 / 30 / 83
(1) (Authorized Signature)		· · · · · · · · · · · · · · · · · · ·	DATE	08 / 30 / 82
(2)	<del>.</del>	,	· DATE ·	
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY	1	HAZ)	ARDOUS WASTE SUBJECT TO FEE	YES NO X
I HEREBY CERTIFY THAT THE ABOVE OF SCRIBED WASTE	AND ADICATED QUANTITY HAS BEEN A			
(Authorized Signiture)		<b>新文稿 人名</b>	DAŢĘ	83082
		:		
COMMENTS OR SPECIAL INSTRUCTIONS.				
N ILLINOIS 217 / 782-3637	_ *24 HOUR EMERGENCY AF	ND SPILL ASSISTANCE NUMBERS.	DUTCIDE ILLINOIS.	ROO / 424-8802 or 202 / 426 202
			OUTSIDE IFFINOIS.	800 / 424-8802 or 202 / 426-267

TO #7 Still 7-63 61/11 8:30 82

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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uthorization	Number		<u> </u>	<u></u>
	_	8 :		13

(217) 782-6760 SPECIAL WASTE HAULING MANIFEST 8159378270 .0910550008 BIRCH ST. MILES LABORATORIES (Company Name) 60901 KANKAKEE State .. 7in WASTE HAULER(S) S.W.H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 2 1360 E. LOCÚST KANKAKEE INDUSTRIAL ILD054155080 S.W.H. Registration Number. Hauler Name Hauler Address Phone Number PROPERTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. <u>91808902</u> . (Facility Name) 199244370 INDO1636026 Alternate (Facility Name) Address Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIOUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. SHIPPING DESCRIPTION: <u>UN1090</u> U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR CONVERTED TO CU. YDS. OR GAL. TONS (circle one) D.O.T. USE TANK TRUCK OPEN TRUCK METHOD OF SHIPMENT (Circle One) (DRUMS, OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEFF A. Ennal Warden I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER BERTIFY HAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE (Authorized Signature) USPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES. DICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \_ \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2575 DISTRIBUTION PART - I GENERATOR PART 21EPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

Authorization Number 8

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES	195 W. BIRCH S	т. 815937	8270 0	91055000	<b>8</b> G
(Company Name)	Address ::	Phone Number		Generator Number	3
KANKAKEE	IL 6	0901	IL	00489559	5 9
City	State Zi	·		EPA Number	
		WASTE HAULER(S)			
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S.W H. Registratio	on Number 0 0 6 6	0 1 2
		8 1 5 9 3 3 2 9 Phone Number	3_11.	L D 0 5 4 1 5 5 EPA Number	080
Hauler Name	Hauler Address		S.W.H. Registrati	on Number	
		> Phone Number		EPA Number	
	DESTINATION - DIS	POSAL STORAGE OR TREATMENT SIT	E :		
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. &	C & O R.R.		9 1 8 0 8 9 Site Number	0 2
GRIFFITH City	State	46319 2 1 9 9 Zip Phor	9 2 4 4 3 7 0 ne Number	I N D O 1 6 3 6	5026
Alternate (Facility, Name)	Address	-		39 Site Number	
City	State	Zip Phor	ne Number	EPA Number	
SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRI  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS  I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE  WASTE HAULER	Number  ARE PROPERLY CLASSIFIED. DESCRI OF THE ILLINOIS DEPARTMENT OF N INFORMATION	OUANTITY OF WASTE DELIVIOUS OF THE PROPERTY OF WASTE DELIVIOUS OF THE PROPERTY	ERED: 0 0 5 0  R (Specify)  BELED AND IS IN PROPER CO	DATE: 3/3/8	Circle One)
THEREBY CERTIFY THAT I		QUANTITY HAS BEEN ACCEPTED IN F	PROPER CONDITION FOR TRA	NSPORT AND I ACKNOWLEDGE	
(1) Hawase France (Authorized Signature)	eme-			DATE: 03 03	' 8క్లె
(2)(Authorized Signature)				DATE:	
DISPOSAL. STORAGE, OR TREATMENT FACILITY*			HAZARDOUS WASTE SUBJE	CT TO FEE YES	NO X
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	TE AND INDICATED QUANTITY HAS I	BEEN ACCEPTED AT THE SITE SPECIF		DATE: 0403	183
COMMENTS OR SPECIAL INSTRUCTIONS:			·		
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION, PART - 1 GENERATOR PART - 2		ENCY AND SPILL ASSISTANCE NUMB	001310	, E ILLINOIS: 800 / 424-8802 or 2	02 / 426-2675

> (Company Name) KANKAKEE

> > City

Hauler Name

GRIFFITH

City

Alternate (Facility Name)

City

WASTE ACETONE

METHOD OF SHIPMENT (Circle One)

SHIPPING DESCRIPTION:

STATE OF ILLINOIS <u>0661195</u> ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 Authorization Number \_\_\_\_\_\_ SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 8159378270 0910550008 IL 60901 I L D O 4 8 9 5 5 9 5 9 44 Z۱p میزد: WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 ILD 0 5 4 1 5 5 0 8 0 S W.H. Registration Number \_\_\_\_\_\_\_ Hauler Address Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 46319 IN State Address" : Site Number State Phone Number EPA Number ACETONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: HAZARD CLASS: U N 1 0 9 0 U 0 0 2 FLAMMABLE LIQUID EPA HW Number QUANTITY OF WASTE DELIVERED: 005000 TONS (circle one) CONVERTED TO CU. YOS. OR GAL. JANK TRUCK OPEN TRUCK OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEEP A. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE

WASTE HAULER

WEIGHT FOR

TO BE COMPLETED BY WASTE GENERATOR

THE DESTINATION AS INDICATED

(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES

WASTE AND IN CATED QUANTITY, HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

REV. # 4

"24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS"

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 4 HAULER

PART 6 - GENERATOR

## STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

Q66119**Ģ** 

Authorization Number \_

	_	SPI	CIAL WASTE HAI	ULING MANIFEST		8	.,
NEAREE INDUSTRIAL DISPOSAL 1360 E. LOCUST Nature Native NUMBER PARTIES NEAREE INDUSTRIAL DISPOSAL 1360 E. LOCUST Nature Native NUMBER PARTIES				8 1 5 9 3 7 8 2	270_0_0	9 1 0 5 5 0 0	086
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NAME INDUSTRIAL DISPOSAL 1360 E. LOCUST  Hauser Name  **AURY ASPESS  **BUSY ASPESS  **BUSY ASPESS  **BUSY ASPESS  **AURY ASPESS  **BUSY ASPESS  **BUSY ASPESS  **AURY ASPESS  **BUSY ASPESS  **AURY ASPESS  **BUSY ASPESS  **AURY ASPES						EPA Number 5	9 <del>-5-9</del>
Hauser Name  **BASE AGREES**  **BASE Name  **BASE NAME  **Applet Name  **BASE NAME  **Applet Name  **COSTANTION - DISPOSAL STORAGE ON THE INVENT SITE  **ACCEPTED **  **ACC			WASTE HA	AULER(S)			
Hauser Name    Hauser Name	NKAKEE INDUSTRIAL DISPOSAL	1360 E. I	OCUST	,	C.W.H. Danishan	0.0.6	60 == 30
House Name  House Agress  SW H. Registration Number  PAR Number  DESTINATION — DEPOSAL STORAGE OR TREATMENT SITE  COLFAX AVE. E.C. F.O. R.R.  GRIFFITH  IN  16319 2 1 9 9 2 1 4 3 7 0 IN D 0 1 6 3 6 0 2 6 6  FOR Number  Address  A	Hauler Name			The state of the s	5.W n Registration	75 25	31
PRINTER NUMBER  DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE  COLFAX AVE & C. S. O. R. R	and the second s	•	_8_:	1 5 9 3 3 2 9 3 1 Phone Number		L D 0 5 4 1 5 EPA Number	5080
DESTINATION — DISPOSAL STORAGE OR FREATMENT SITE  COLFX AVX. 8 C. 8 O. R.R. 3  GRIFFITH  IN  46319  2199244370 IN DO1636026  CHY  Suite  Address  A	Hauler Name	Hauler Address	<del></del>		S.W.H. Registration	Number	
DESTINATION — DISPOSAL STORAGE OR FREATMENT SITE  COLFX AVX. 8 C. 8 O. R.R. 3  GRIFFITH  IN  46319  2199244370 IN DO1636026  CHY  Suite  Address  A		-		Phone Number		FPA Number	
GRIFFITH IN 46319 219924 37 0 IND 0 16 3 6 0 2 6 9  Coy Sure Zop Phone Number  Address Prome Number  Address Prome Number  Address Prome Number  Address Prome Number  To be completed by Waste Rade Address Prome Number  To be completed by Waste Rade Address Prome Number  The Special Waste Being transported under this Manifest is of the dot inazard classfication indicated inmediately Bellow.  Shipping descapition:  Maste Acetore Flammable Liquid Union of Na Number  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted to Union Na Number)  Weight For Le Pa use Must be Converted to Waste Delivered Open Rade Outs Tokes (Converted Sprawl)  In Receive Address to And Certify That The Above waste And Collabor Open Rade Outs And Lebeled And Is in Proper Condition For Transport and I acknowledge The Obstination as indicated Outs The Obstination as indicated Outs The Obstination And Lep 19 19 19 19 19 19 19 19 19 19 19 19 19	- · · · · · · · · · · · · · · · · · · ·	DESTINA	TION - DISPOSAL ST				<del></del>
GRIFFITH IN 46319 2 1 9 2 4 4 3 7 0 I N D D 6 3 6 0 2 6 9  Cry Suite Zop Phone Number 664 Number 664 Number 664 Number 664 Number 664 Number 665 Number 66		ECOLFAX	AVE. & C	OR R. P.		91808	3902
CHY SIDE TO BE COMPLETED BY  AGE COMPLETED BY  MASTE FRAME  COTY  STATE  CONTAMINATES  WASTE PRASE  LIQUID  THE SPECIAL WASTE BANK  WASTE PRASE  LIQUID  WASTE PRASE  WASTE PRASE  LIQUID  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  WASTE PRASE  WASTE PRASE  WASTE PRASE  UN 1 0 9 0  WASTE PRASE  UN 1 0 9 0  UN 0 0 2  PRASE PRASE  UN 1 0 9 0  UN 0 0 0 2  PRASE PRASE  UN 1 0 9 0  UN 1 0 9 0  UN 0 0 0 2  PRASE PRASE  UN 1 0 9 0  UN		70.	Address	2 1 N	4050		
City Suite Zo Prome Number EPA Number  TO BE COMPLETED BY WASTE CHRISTON  WASTE NAME: ACETONE & CONTAMINATES  WASTE PRANSPORTED UNDER THIS MANIFEST SOF THE DOT HAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Garroya, Sofie))  SHIPPING DESCRIPTION:  HAZARO CLASS:  WASTE ACETONE  FLAMMBLE LIQUID  WEIGHT FOR 1 P. A. USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE VIDEO TONS (CITY OF THE NUMBER)  WEIGHT FOR 1 P. A. USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE LIVE OF THE LIVE OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE L			40	0319 2 1 9 9 2 4  Op Phone Number	4370	INDU163 EPA Number	6026
City Suite Zo Prome Number EPA Number  TO BE COMPLETED BY WASTE CHRISTON  WASTE NAME: ACETONE & CONTAMINATES  WASTE PRANSPORTED UNDER THIS MANIFEST SOF THE DOT HAZARO CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Garroya, Sofie))  SHIPPING DESCRIPTION:  HAZARO CLASS:  WASTE ACETONE  FLAMMBLE LIQUID  WEIGHT FOR 1 P. A. USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE VIDEO TONS (CITY OF THE NUMBER)  WEIGHT FOR 1 P. A. USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE LIVE OF THE LIVE OF THE LIVE OF THE PA USE MUST BE CONVERTED TO CITY OF WASTE DELIVERED OF THE LIVE OF THE L		•					
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  SHIPPING DESCRIPTION:  WASTE ARMS:  ACETONE  FLAMABLE LIQUID  WASTE ACETONE  FLAMABLE LIQUID  WEIGHT FOR L.P.A. USE MUST BE CONVERTED TO CU. YOS OR GAL.  OUT. USE  WEIGHT FOR L.P.A. USE MUST BE CONVERTED TO CU. YOS OR GAL.  OUT. USE  METHOD OF SHIPMENT (GIFTLE ONE)  No. TON'S (GIFTLE ONE)  NO. T. USE  WEIGHT FOR L.P.A. USE MUST BE CONVERTED TO CU. YOS OR GAL.  OPEN TRUCK  OPEN TRUCK  OTHER (Specify)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERTY CLASSIFED. DESCRIBED. PRICKAGED, MARKER'S AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.  IN ACCORDANCE WHITE THE APPLICABLE REQUILATIONS OF THE ILLINOIS OFFRA METHOD OF TRANSPORTATION.  WASTE HAULER  I HEREBY ACREE TO AND CERTIFY THAT THE ABOVE NESSCRIBED WASTE AND DUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE  THE DESTINATION AS NOICATED:  (Authorized Signature)  I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND DUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.  DATE:  J. 29/ 83  COMMENTS OR SPECIAL INSTRUCTIONS:  WASTE HAULENDIS. 277 / 782-3637  OUTSIDE ILLINOIS. BOD / 424-8802 or 202 / 426-2675	Alternate (Facility Name)		Address	<del></del>		39 Site Numb	er 46
WASTE ARME: ACETONE & CONTAMINATES WASTE PHASE LIQUID (Liquid, Gaseopic, Solid)  THE SPECIAL WASTE BERNG TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WASTE ACETONE  WASTE ACETONE  FLAMMABLE LIQUID  UN 1 0 9 0  UN 0 0 2  FRAHW Number  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  METHOD OF SHIPMENT (Circle one)  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  METHOD OF SHIPMENT (Circle one)  METHOD OF SHIPMENT (Circle one)  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  METHOD OF SHIPMENT (Circle one)  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOUS OR GAL.  UN OF NA Number  UN ON NA NUMBER	City	State		ip Phone Numbe	<del></del>	EPA Number	<del></del>
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  WASTE ACETONE  FLAMMABLE LIQUID  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  WEIGHT FOR LE P.A. USE MUST BE CONVENTED TO U. YOS OR GAL.  OUTHER (Specify)  TANK TRUCK  OPEN TRUCK  OPEN TRUCK  OTHER (Specify)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERTY CLASSIFIED DESCRIBED PICKAGED. MARKED AND LABBLED AND IS IN PROPER CONDITION FOR TRANSPORTATION.  IN ACCORDANCE WITH THE ABOVE WRITTEN INFORMATION  WASTE HAULER  I HEREBY AGREE TO AND CERTIFY THAT THE ABOVE WRITTEN INFORMATION  (Authorized Signature)  (Authorized Signature		A Promotor of	· ·				
(Authorized Signature)  DISPOSAL, STORAGE, OR TREATMENT FACILITY*  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:  (Authorized Signature)  (Authorized	WASTE ACETONE  WEIGHT FOR 43,660 LBS D.O.T. USE 47,660 TONS (circle one)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE  WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS IND	WEIGHT FOR I.E.P. CONVERTED TO CL  UMS	A. USE MUST BE OF TANK TRUCK  TANK TRUCK  THED. DESCRIBED. PACE  TANK TRUCK  THE TANK TRUCK  THE TANK TRUCK  THE TANK TRUCK  THE TANK TRUCK  TO TH	UN OF NA NUMBER  UN OF NA NUMBER  UN OF WASTE DELIVERED:  OPEN TRUCK  OTHER (Specify  CALLACT  (Authorized Signature)	EF O 0 5 0 II) IS IN PROPER CON	DATE: 3/28	$\frac{1}{53}$ $\frac{1}{8}$ $\frac{1}{8}$ $\frac{3}{59}$
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:  [Authorized Signature]  [Author	(2) Geory Kie				`	DATE: 3/ 29	/ 83
COMMENTS OR SPECIAL INSTRUCTIONS:  Outside Illinois: 800 / 424-8802 or 202 / 426-2675	<del></del>					T TO FEE YES	NO
IN ILLINOIS. 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675		STE AND INDIVATED QUA	NTITY HAS BEEN ACC	EPTED AT THE SITE SPECIFIED ABO	VE:	DATE: 3 29	1/83
W IEE MOIS. 211 7 182-3631	COMMENTS OR SPECIAL INSTRUCTIONS:	V		412			
W IEE MOIS. 211 7 182-3631							
							202 / 426-2675

COMPLETED BY GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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LES LABORATORIES	195 W. BIR	CH ST R	159378270	0 9 1 0 5 5 0 0	0_86_
(Company Name)	Address				1
KANKAKEE	<u>IL</u>	<u>60901</u>	I	L D O 4 8 9 5 5 9	
Crty	State	Zip		EPA Number	
		WASTE HAULER(S)			÷
ŒE INDUSTRIAL DISPOSAL	1360 E. LOC	UST	S.W.H. Re	gistration Number $\frac{25}{25}$ 0 0 6 6	ე <u>ე</u>
Hauter Name	Hauler Address	·		25	31
	ş	8159	3 3 2 9 3 1 one Number	LLD054155	080
Hauler Name	Hauler Address	<i>(</i> )	S W.H. RE	gistration Number	38
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	DECTIVATION		one Number	EPA Number	
ICAN CHEMICAL SERVICE		N - DISPOSAL STORAGE O	R IREAIMENT SITE		
(Facility Name)		&C&ORR		9 1 8 0 8 Site Number	302
GRIFFITH	IN-	46319	219924437	'O INDO163	6026
City	State	Zip	Phone Number	0 INDO163	
<u> </u>	·	<u> </u>	•		<u> </u>
Alternate (Facility Name)	Add	dress		39 Sile Number	46
City	State	Zi0"	Phone Number	EPA Number	
E COMPLETED BY	<del></del>	<del>)</del>		F.	
TE GENERATOR WASTE NAME	ICETONE & CON	TAMINATES	WASTE PHASE:	LIQUID	
SPECIAL WASTE BEING TRANSPORTED UNDER THIS	MANIFEST IS OF THE DOT	HAZARD CLASSIFICATION	INDICATED IMMEDIATELY BELOW:	(Liquid, Gaseõus, Solid)	
SHIPPING DESCRIPTION:	HAZARD CLÁSS:				:
WASTE ACETONE	FLAMMABLE L	10UID!	U N 1 0 9 0 UN or NA Number	U 0 0 2 EPA HW Number	
( ( )					Circle (loss)
T. USE 43,080 (BS) TONS (circle one)	WEIGHT FOR I.E.P.A. CONVERTED TO CU. Y	USE MUST BE QUANTITY	OF WASTE DELIVERED.	2 CU. YUS.	Circle One)
	-ر:			·	53.
METHOD OF SHIPMENT (Circle One) (DRU	MS	NK TRUCK OPEN TR	UCK , OTHER (Specify)		_
3 IS TO CERTIFY THAT THE ABOVE NAMED WASTE A	RE PROPERLY CLASSIFIED	DESCRIBED, PACKAGED, M	MARKED, AND LABELED AND IS IN PRO	PER CONDITION FOR TRANSPORTATION	<b>.</b>
CCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPARTN	ENT OF TRANSPORTATION	AND I E.P.A.	3/30/	92
EREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	JEN OS	rized Signature)	DATE:	
ISTE HAULER	<del></del>	(75)	The origination of		<del></del> .
HEREBY CERTIFY THAT TO		TE AND QUANTITY HAS BEE	EN ACCEPTED IN PROPER CONDITION F	OR TRANSPORT AND LACKNOWLEDGE	
( , , )		,		N 7 1 7 1	
12 cary Ked.	Juc			DATE: 3/30	<u>کے کا</u> /
* (Authorized Signature)	٠.	The state of the s	•	* / /	, , , , ,
. (Authorized Signature)				DATE:	$\sqrt{}$
COOCAL CYCRAFT OR TREATMENT FACULTYS.		<del></del>			<del></del>
SPOSAL, STORAGE, OR TREATMENT FACILITY	Ω	TV 1145 DEPM ACCEPTED AT	. HAZARDOUS WASTE	SUBJECT TO FEE YES	NO
HEREBY CERTIFY THAT THE ABOVE DESCRIPTED WAS	LE AND INDICATED QUANTI	IT HAS BEEN ACCEPIED AT	THE SITE SPECIFIED ABOVE:	スマ	D XZ
(Authorized Signature)	a grade			DATE:	7 _0_0
/	<del>-/</del>			<del></del>	<del></del>
DMMENTS OR SPECIAL INSTRUCTIONS:		L			
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	*24 HOUR	EMERGENCY AND SPILL AS	SSISTANCE NUMBERS*	OUTSIDS W.L. WOOD 000 424 0000	202 / 425 202
I ILLINOIS: 217 / 782-3637 ISTRIBUTION PART - 1 GENERATOR PART - 21		PART - 4 HAULER	PART - 5 IEPA PART 6 - GE	OUTSIDE ILLINOIS: 800 / 424-8802 or NERATOR	202 / 426-26/5
EV. # 4	<u>-</u>		<del></del>	· · · · · · · · · · · · · · · · · · ·	

#### IL 532-610

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 20 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 6270 0661198

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 Authorization Number SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 195 W. BIRCH ST (Company Name) KANKAKEE 60901 ILD 0 48955959 State City KANKAKEE INDUSTRIAL DISPOSAL S W H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 2 1360 E. LOCUST Hauler Name <u> 1 L D O 5 4 1 5 5 0 8 0</u> S.W.H. Registration Number Hauler Name Hauler Address EPA Number Phone Number DESTINATION - DISPOSAC STORAGE OR TREATMENT SITE 9 1 8 0 8 9 0 2 AMERICAN CHEMICAL SERVICE COLFAX AVE (Facility Name) GRIFFITH IND016360265 IΝ Alternate (Facility Name) Address Site Number L City EPA Number State Phone Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID quid. Gaseous. Solid) WASTE NAME WASTE PHASE: THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION. UN1090 0005 WASTE ACETONE FLAMMABLE LIQUID UN or NA Number EPA HW Number QUANTITY OF WASTE DELIVERED: 00500 WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. TONS (circle one) METHOD OF SHIPMENT (Circle One) **OPEN TRUCK** OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND/LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A. OTR I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY® HAZARDOUS WASTE SUBJECT TO FEE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE I HEREBY CERTIFY THAT THE ABOVE DESCRIBED, WAS DATE: (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS:

PART - 3 SITE

PART - 2 IEPA

IN ILLINOIS, 217 / 782-3637

REV # 4

DISTRIBUTION: PART - 1 GENERATOR

PART - 5 IEPA

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 4 HAULER

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 425-2675

PART 6 - GENERATOR

REV # 4

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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		_

Authorization Number

200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULI**N**G MANIFEST

MILES LABORATORIES	195 W. BIR	CH ST. 8 1	593782	7 0 0 9 1 0 Gene	55 <u>0</u> 008 a
(Company Name)  KANKAKEE	Addre		Phone Number		
City	IL State	<u>60901</u>		<u> </u>	8 9 5 5 9 5 9
0.,,	Jiate	WASTE HAULER(S)	<del></del>	EPA	vumber .
	_	, .			
KANKAKEE INDUSTRIAL DISPOSA		OCUST	•	S.W.H. Registration Number	0066012
Hauler Name	Hauler Address	8150			
	en e	Phon	3 3 2 9 3 1 e Number	1 1 0 0	54155080 EPA Number
The Atlanta	Sept.	·		S W H. Registration Number	
Hauler Name	Hauler Addisess			J	? 38
		Phon	e Number		EPA Number
	DESTINA	TION — DISPOSAL STORAGE OR	TREATMENT SITE		
AMERICAN CHEMICAL SERVICE (Facility Name)		E. & C & O R.R.			1 8 0 8 9 0 2 Site Number 46
GRIFFITH	IN	46319	210021		
City	State	Zip	Phone Number	<u> </u>	0 1 6 3 6 0 2 6 5 EPA Number
				• .	
Alternate (Facility Name)		Address	·*.	39	Site Number 46
City	State	Zip	Phone Number		EPA Numoer
TO BE COMPLETED BY WASTE GENERATOR			· · ·		,
WASTE NAME:	ACETONE & C		WASTE P	(Liquid	[QUID Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS SHIPPING DESCRIPTION:	MANIFEST IS OF THE ( HAZARD CLASS:	OT HAZARD CLASSIFICATION IN	DICATED IMMEDIATELY BE	ELOW: (Eldoid:	descous. Solidy
·			UN1090	u o (	) 2
WASTE ACETONE	FLAMMABLE	LIQUID - U	UN1090 N or NA Number	EPA HW Num	per
WEIGHT FOR 40,620 165 TONS (circle one)	WEIGHT FOR I.E.P CONVERTED TO CU	A. USE MUST BE QUANTITY OF	F WASTE DELIVERED:	05000	1 GALLONS (Circle One)
0.0.1. USE 70/3 TONS (circle one)	CONVERTED TO CO	TUS. UR GAL.	47	52	53
METHOD OF SHIPMENT (Circle One) (DRU	MS	TANK TRUCK OPEN TRUC	CK OTHER (Specify)		<del></del>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE	ARE PROPERLY CLASSIF			IS IN PROPER CONDITION FOR	TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPAR		BOPEPA Sarberi/	000	4/7/83
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION		ed Signature)	DATE:	7/ // 83
WASTE HAULER					
THE DESTINATION AS INDIC		ASTE AND QUANTITY HAS BEEN	ACCEPTED IN PROPER CO	NOITION FOR TRANSPORT AND	I ACKNOWLEDGE
Comme Will	_	<b>&gt;</b>	:		417183
(1) (Authorized Signature)	<u> </u>		ঞ	DATE	
(2)			•	DATE: _	
(Authorized Signature)				<u> </u>	•
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			HAZARDO	US WASTE SUBJECT TO FEE	YES NO.: X
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	TE AND INDIC	ITITY HAS BEEN ACCEPTED AT T	HE SITE SPECIFIED ABOVE	<b>E</b> ∙	11 - 5
	whee			DATE.	41123
(Authorized Signature)		<u> </u>		<del></del>	
COMMENTS OR SPECIAL INSTRUCTIONS:	· · · · · · · · · · · · · · · · · · ·	<del></del>			
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	*24 HO	UR EMERGENCY AND SPILL ASS	ISTANCE NUMBERS*	OUTCODE II ANGIO O	20 / 424 9902 202 / 426 2025
IN ILLINOIS, 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 21				OUTSIDE ILLINOIS. 8 PART 6 - GENERATOR	00 / 424-8802 or 202 / 426-2675

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number \_\_\_\_\_.

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8 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 MILES LABORATORIES 195 W. BIRCH ST. (Company Name) ILD048955959 KANKAKEE 60901 IL City FPA Number State 7ın WASTE HAULER(S) 1360 E. LOCUST S.W.H. Registration Number \_\_\_\_\_ VKAKEE INDUSTRIAL DISPOSAL Hauler Name Hauler Address 110054155080 Hauler Address Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C 370 INDO16360265 GRIFFITH Alternate (Facility Name) Address Site Number State Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: \_ WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: U N 1 0 9 0 U 0 0 2 EPA HW Number WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED: 000500 WEIGHT FOR I.E.P A. USE MUST BE BS) TONS (circle one) WEIGHT FOR CONVERTED TO CU. YDS. OR GAL. ~ 1 METHOD OF SHIPMENT (Circle One) ANK TRUCK OPEN TRŮCK OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.F.A. (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 4/15/83 (Authorized Signature) DISPOSAL. STORAGE, OR TREATMENT, ACILITY. HAZARDOUS WASTE SUBJECT TO FEE ATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: HEREBY, CERTIFY THAT THE ABOVE (Authorized Sign COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS: 217 / 782-3637 PART - 3 SITE PART - 4 HAULER PART 6 - GENERATOR DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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(217) 782-6760 SPECIAL WASTE HAULING MANIFEST 0910550008 MILES LABORATORIES 8159378270 195 W. BIRCH ST. (Company Name) KANKAKEE 60901 IL I L D 0 4 8 9 5 5 9 5 9 City State WASTE HAULERES) S W H. Registration Number \_\_\_\_\_\_\_0 0 6 6 0 1 1360 E. LOCUST NKAKEE INDUSTRIAL DISPOSAL Hauler Address Hauler Name Hauler Address Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE MERICAN CHEMICAL SERVICE
(Facility Name) COLFAX AVE. & C & O R.R. 2 1 9 9 2 4 4 3 7 0 1 N D 0 1 6 3 6 0 2 6 5 Alternate (Facility Name) Address Site Number City Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES & \* LIQUID WASTE NAME: \_ WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW SHIPPING DESCRIPTION: HAZARD CLASS: M 1 0 9 0 WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED: 005005 WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR CONVERTED TO CU. YDS. OR GAL. D.O.T. USE <u></u> METHOD OF SHIPMENT (Circle One) TANK TRUCK OPEN TRUCK (DRUMS OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND LEP.A. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 41 28 83 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE ALED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. I HEREBY CERTIFY THAT THE ABOVE DE (Authorized Signat COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS IN ILLINOIS, 217 / 782-3637 OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 PART - 5 IEPA

PART - 3 SITE

PART - 2 IEPA

DISTRIBUTION: PART - 1 GENERATOR

PART 6 - GENERATOR

PART - 4 HAULER

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 0661203

Authorization Number (217) 782-6760 SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0 9 1-0 5.5-0.0 0 8 (Company Name) KANKAKEE IL 60901 ILD048955959 State 7ın WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S W.H. Registration Number \_ Hauler Name Hauler Address S.W H. Registration Number Haufer Name Hauler Address Phone Number FPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 9 9 2 4 4 3 7 0 I N D 0 1 6 3 6 0 2 6 5 GRIFFITH Alternate (Facility Name) Site Number Address EPA Number City State 7ın Phone Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIOUID WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CRASSIFICATION, INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: U 0 0 2 U N 1 0 9 0 FLAMMABLE LIQUID WASTE ACETONE WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. TONS (circle one) METHOD OF SHIPMENT (Circle One) ANK TRUCK OPEN TRUCK OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 5/6/83 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE HAZARDOU:

QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. I HEREBY CERTIFY THAT THE ABOVE-DESCR (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS 217 / 782-3637 PART - 4 HAULER PART - SIEPA PART 6 - GENERATOR PART - 2 IEPA PART - 3 SITE DISTRIBUTION: PART - 1 GENERATOR

SITE COPY - PART 3

To#75till 5.683

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### STATE OF ILLINOIS

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TO BE COMPLETED BY	Environmi	ENTAL PROTECTION AGENCY		Ubb I Z I 4
WASTE GENERATOR		F LAND POLLUTION CONTROL		
	2200 CHORCHILL R	ROAD, SPRINGFIELD, ILLINOIS 627 (217) 782-6760	'UO Authorization N	umher
	, SPECIAL V	VASTE HAULING MANIFEST		8 13
MILES LABORATORIES	JOE W. DIDGE	4, K	1270 001	0550008
(Company Name)	195 W. BIRCH			
•	_	Phone Number		Generator Number 24
KANKAKEE City :	IL60	0 <b>901</b> Zip		4 8 9 5 5 9 5 9 EPA Number
		WASTE HAULER(S)	<del></del>	El A Homod
	,			
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	<u></u>	S.W.H. Registration Number	006601
Hauler Name	Hauler Address	915033303		54155080
		8 1 5 9 3 3 2 9 3		EPA Number
		Those Names	0 W D N	•
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Numb	32 38
		<u></u>		
		Phone Number		EPA Number
AMEDICAN CLEMICAL CERUITOR		DISPOSAL STORAGE OR TREATMENT SITE		01808002
AMERICAN CHEMICAL SERVICE (Facility Name)	Address	ECEOR.R.	39	9 1 0 0 0 9 0 2 Site Number 46
		מסיד מידים	י אד מדכולות	D01636026
GRIFFITH City	State	Zip Phone N	2 4 4 3 1 <u>0 1 1</u>	EPA Number
Alternate (Facility, Name)	Address	<del></del>	39	Site Number 46
City	State	Zip Phone N	umber	EPA Number
TO BE COMPLETED BY WASTE GENERATOR				
WASTE NAME:A	CETONE & CONTAM		(Lie	JOUID uig, Gaseous, Sond)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS SHIPPING DESCRIPTION:		ARD CLASSIFICATION INDICATED IMMEDIATE	ELY BELOW:	old. descous, danay
	HAZARD CLASS:	u v 1 0 0	0 11	0.02
WASTE ACETONE	FLAMMABLE LIKO	UID UN OF NA Number,	EPA HW	0 0 2 Number
		<u></u> 5. −	A 11 1	GALLONS Circle One)
WEIGHT FOR TONS (circle one)	WEIGHT FOR I.E.P.A. USE N CONVERTED TO CU. YDS. 0		100000	2 00 103 1
		_	•	53
METHOD OF SHIPMENT (Circle One) (DRU	MS } TANK TE	RUCK OPEN TRUCK OTHER (S)	pecify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A		CRIBED, PACKAGED, MARKED, AND LABELE	D AND IS IN PROPER CONDITION	FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS		OF/TRANSPORTATION AND I.E.P.A.	, /	St. 3/82
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	I INFORMATION .	MALONA SULAN	DATE	0// 3/33
<del></del>		(Authorized Signature)		·
		ND QUANTITY HAS BEEN ACCEPTED IN PROP	PER CONDITION FOR TRANSPORT	AND I ACKNOWLEDGE
THE DESTINATION AS INDIC	ATED:	•		
-Houses King	دی رسے ا		DA	: 0 <u>5</u> 121 83
(Authorized Signature)				54 2 2 3
(2)		·	DA	TE:
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY		;HAZ	ZARDOUS WASTE SUBJECT TO FE	E YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	E AND INDICATED QUANTITY HA	AS BEEN ACCEPTED AT THE SITE SPECIFIED		
-HH	11/2		0.4	13/2/82
(Authorized sign (ure)	There	/ /		
		٠٠٠		
COMMENTS OR SPECIAL INSTRUCTIONS.				
<del></del>				
W. H. M. M. C. 247 J. 252 2527	*24 HOUR EME	RGENCY AND SPILL ASSISTANCE NUMBERS	• OUTSIDE DE INO	S 800 / 424-8802 or 202 / 425-2675

PART - 5 IEPA PART - 3 SITE PART - 4 HAULER

IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR -

PART - 2 IEPA

PART 6 - GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

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	0, 22,,	TE TEASTE ELACEITO	MANIESI			
MILES LABORATORIES	195 W. BIRG	ж st. 8	15937827	70 091	550008	G
(Company Name)	Address		Phone Number		nerator Number	24
KANKAKEE	IL State	60901			4895595	9
City	State	Zip	,	EF	A Number	
		WASTE HAULER(S	)			
ANKAKEE INDUSTRIAL DISPOSAL	1360 E. LO	CUST	·	W H Registration Number	0 9 6 6 0	16
Hauler Name	Hauler Address					31
			332931	ILDO	5 4 1 5 5 0 8 EPA Number	0_
	` <b>`</b>	75				
Hauler Name	Hauler Address	ike &	*	S.W.H. Registration Number	<del></del>	38
÷		· ————		!		
··-··-	DESTINATION	N — DISPOSAL STORAGE O	none Number		EPA Number	
AMERICAN CHEMICAL SERVICE		. & C & O R.R			9180890	2
(Facility Name)		ress	<u>.</u>	39	Site Number	46
GRIFFITH	IN	46319	219924	4370 IN	D O 1 6 3 6 0	265
City	State	Zip	Phone Number		EPA Number	
Alternate (Facility Name)	- And	ress		39	- Cita Number	
Anethate (Facility, Name)	AGO	1622		<i>5.</i>	Site Number	~
City	State	Zip	Phone Number		EPA Number	
TO BE COMPLETED BY WASTE GENERATOR						
WASTE NAME:	CETONE & CON		WASTE PH	// // // // // // // // // // // // //	UID d, Gaseous, Solid)	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS I SHIPPING DESCRIPTION:	MANIFEST IS OF THE DOT HAZARD CLASS:	HAZARD CLASSIFICATION	INDICATED IMMEDIATELY BEL	.0 <b>W</b> :	u, dascous, Solid)	× .
SHIFFING DESCRIPTION.	IAZARU CLASS.		H N T O O O	11.0	. 0 2	
WASTE ACETONE	FLAMMABLE L	IQUID	UN or NA Number	EPA HW N	umber	
WEIGHT FOR THE TIME	WEIGHT FOR LE P.A. I	ISE MIIST RE	OF WASTE DELIVERED:	05000	GALLONS Circl	e One)
WEIGHT FOR 39,860 (LBS) D.O.T. USE 39,860 (Circle one)	WEIGHT FOR I.E.P A. I CONVERTED TO CU. YI	OS. OR GAL QUANTITY	OF WASTE DELIVERED:	$\frac{3}{52}$	_ 2 <del>CS. 10</del> S	1 .
METHOD OF SHIPMENT (Circle One) (DRUM	IS ) TA	NK TRUCK OPEN TR	NUCK OTHER (Specify)			33
•	Number		, , , , , , , , , , , , , , , , , , , ,			-
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE AF IN ACCORDANCE WITH THE APPLICABLE REGULATIONS O	IE PROPERLY CLASSIFIED, F. THE ILLINOIS DEPARTM	, DESCRIBED' PACKAGED.	MARKED AND LABELED AND I	S IN PROPER CONDITION F	OR TRANSPORTATION.	5.5
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN		Towner's	Distrik!	DATE:	5/20/83	
THERES ASSECTION AND CENTER THE ASSECTION AND THE ASSECTION ASSECTION AND THE ASSECTION ASSE	TO CHILD A THOU	// Autho	rized Signature)	DATE:		
WASTE HAULER I HEREBY CERTIFY THAT THE	ABOVE-DESCRIBED WAS	TE AND QUANTITY HAS BE	EN ACCEPTED IN PROPER CON	DITION FOR TRANSPORT A	ID I ACKNOWLEDGE	-
THE DESTINATION AS INDICA		-				
Kiel Samaa	Hazard		. "	0.76	5/20/	83
(Authorized Signature)	- Mensy	÷	#	DATE	54	
(2)Υ		 		DATE	://	
(Authorized Signature)	<u> </u>	10 °				·
DISPOSAL, STORAGE, OR TREATMENT FACILITY			· HAZARDOU	S WASTE SUBJECT TO FEE	YES NO	
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBE WASTE	AND INDICATED QUANTIT	Y HAS BEEN ACCEPTED A	T THE SITE SPECIFIED ABOVE:		< 77 Y	F. 3
- Himple	نسسب		-	DATE		
(Authorized Signature)						
COMMENTS OR SPECIAL INSTRUCTIONS			1	<del></del>		
						<u></u>
	484 ****	EMERCENCY AND COUR	CCIPTALION WILLIAMS COCO			<del></del> .
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 2 (EF		PART - 4 HAULER	<u> </u>	OUTSIDE ILLINOIS	800 / 424-8802 or 202 /	426-2675
REV # 4	2 1901,721[	FART - 4 DAULER	FART SIEFA 17	3 GENERATOR		

#### IL 532 610 LPC 62 8 191

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 <u>0634195</u>

Authorization Number (217) 782-6760 SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 8 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 195 W. BIRCH ST. (Company Name) I L D 0 4 8 9 5 5 9 5 9 KANKAKEE IL 60901 City State WASTE HAULER(S) S W H. Registration Number \_\_\_\_\_ 0 0 6 6 0 1 2 1360 E. NKAKEE INDUSTRIA <u>ILD054155080</u> S.W.H. Registration Number Hauler Name Hauler Address Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE <u>AMERICAN CHEMICAL SERVICE</u> COLFAX AVE. ECEOR.R. GRIFFITH <u>99244370 INDO16360265</u> IN City Alternate (Facility Name) Site Number Address City State Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR . ACÈTONE & CONTAMINATES LIQUID WASTE NAME: WASTE PHASE (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW SHIPPING DESCRIPTION: HAZARD CLASS UN 1 0 9 0 EPA HW Number WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED: 005000 WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR 200 LBS TONS (circle one) CONVERTED TO CU. YDS. OR GAL D.O.T. USE TANK TRUCK METHOD OF SHIPMENT (Circle One) OPEN TRUCK (DRUMS\_ OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: Authorized Signature) (Authorized Signature) DISPOSAL. STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE YES I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE DATE: 07 01 83 COMMENTS OR SPECIAL INSTRUCTIONS. \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS, 217 / 782-3637 PART - 3 SITE PART - 4 HAULER PART 6 - GENERATOR DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA

SITE COPY - PART 3

REV. # 4

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#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

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Authorization Number

W. 56 / Apop 4700 1-6		- TOTAL TIMOLITY				
MILES LABORATORIES (Company Name)	195 W. BIR	<u>CH ST.</u> 8 ]	1 5 9 3 7 8 2 7	<u> 70 09</u>	1055000	<u>8 c</u>
KANKAKEE			Phone Number			
City	State			I L D	0 4 8 9 5 5 9 EPA Number	<u>_5_9</u>
· · · · · · · · · · · · · · · · · · ·		WASTE HAULER	(S)		ETA Manuel	
		•				
NKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LO Hauler Address	<u>CUST</u>	•	S.W.H. Registration N	umber <u>0 0 6 6</u>	_0_1_#
<b>)</b>	•	8159	9 3 3 2 9 3 1 Phone Number	I.L.D.	0_5_4_1_5_5_0 EPA Number	_8_0
Hauler Name	Hauler Address	·		S.W.H. Registration N	umber	<del></del>
			Phone Number		EPA Number	
AMEDICAN CUENTCAL CEDVICE		ATION — DISPOSAL STORAGE				
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AV	E. & C & O R.F. Address	<u>₹.</u>	7	9 1 8 0 8 Site Number	
GRIFFITH	IN	46319	219924	<u>4370 I</u>	N D 0 1 6 3 6	026
City	State	Zip	Phone Numbe	er .	EPA Number	
Alternate (Facility, Name)		Address	<u> </u>		39 Sile Number	
City	State	Zip	Phone Numbe	ar — — — — ·	EPA Number	·
TO BE COMPLETED BY WASTE GENERATOR		<del></del>	<del></del>		<del></del>	
WASTE NAME:	ACETONE & CO			PHASE:	LIQUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE SHIPPING DESCRIPTION:	IS MANIFEST IS OF THE I	DOT HAZARD CLASSIFICATIO	N INDICATED IMMEDIATELY E	BELOW:	· (Liquid, Gaseous, Solid)	
Sili i i i de Sestili i i i i i i i i i i i i i i i i i i	TIADATO COASS.	•	0 0 0 14 1	ı	1002	
WASTE ACETONE	FLAMMABLE	LIQUID	UN or NA Number	EPA	JOO2 HW Number	
WEIGHT FOR LBS D.O.T. USETONS (circle one	WEIGHT FOR I.E.P CONVERTED TO CL	.A. USE MUST BE J. YDS. OR GAL. QUANTI	TY OF WASTE DELIVERED: 47	<u>, 0500</u>	1 GALLONS 2 CO: 10S.	(Circle One)
METHOD OF SHIPMENT (Circle One) (OF	Number	TANK TRUCK OPEN	TRUCK OTHER (Specify	у)		<del>-</del>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATION	ARE PROPERLY CLASSIF	FIED, DESGRIBED, PACKAGED	), MARKED, AND LABELED AN	ID IS IN PROPER CONDI	TION FOR TRANSPORTATION	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTI		Lende	a Darber		DATE 6/14/83	3
The Address of Alley German Time Address American	M. Gilmarion	(Aut	thorized Signature)		7 7	
		MASTE AND QUANTITY HAS I	BEEN ACCEPTED IN PROPER C	CONDITION FOR TRANSP	ORT AND I ACKNOWLEDGE	
THE DESTINATION AS IND	ICATED:		,		,	<i>( c.</i>
(1) Jose Sunters.	·	•		~	DATE: 06/14	183_
(Authorized Signature)	٠		•		× / /	59
(2)(Authorized Signature)	<del></del>		• •		DATE:/	
DISPOSAL STORAGE, OR TREATMENT FACILITY*		<del></del>		ONE WASTE CHOICAL	TO SEE VES	
I HEREBY CERTIFY THAT THE ABOVE DESCRIPTIONAL	STE AND NOICATED OIL	STITY HAS BEEN ACCEPTED		OUS WASTE SUBJECT 1	TO FEE YES	NU
HL	udoo	/ /	A1 1112 G. 12 G. 1	7	NITE 6/14	183
(Authorized Signature)	The				0A1C	65
COMMENTS OR SPECIAL INSTRUCTIONS:	1					
ein						- <u>-</u> -
IN ILLINOIS: 217 / 782-3637		OUR EMERGENCY AND SPILL			LINOIS: 800 / 424-8802 or 2	202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2	PIEPA PART - 3 SI	ITE PART - 4 HAULER	. (	PART 6 - GENERATOR		
REV. # 4	OPY - PART 3	To #75:	HU 7-63 6	RU 614	83	

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62700 0791641

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 Authorization Number \_ SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 8159378270 \_\_09105\_50008 (Company Name) KANKAKEE IL I L D 0 4 8 9 5 5 9 5 9 EPA Number 60901 City State WASTE HAULER(S) \*17 ANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 S.W.H. Registration Number Hauler Name Hauler Address EPA Number DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 9 9 2 4 4 3 7 0 I N D 0 1 6 3 6 0 2 6 5 GRIFFITH Alternate (Facility Name) Site Number Address City State Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIOUID WASTE PHASE THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid) HAZARD CLASS: SHIPPING DESCRIPTION: UN OF NA Number U 0 0 2 FLAMMABLE LIQUID WASTE ACETONE QUANTITY OF WASTE DELIVERED 00000 WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR D.O.T. USE \_36 CONVERTED TO CU. YDS. OR GAL. TONS (circle one) OPEN TRUCK METHOD OF SHIPMENT (Circle One) TANK TRUCK (DRUMS OTHER (Specify) THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION AND LEGAN FROM LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION AND LEGAN IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION **WASTE HAULER** I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY-HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES IBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS, 217 / 782-3637 PART - 5 IEPA PART 6 - GENERATOR DISTRIBUTION: PART - 1 GENERATOR PART - 3 SITE PART - 2 IEPA

SITE COPY - PART 3 To # 75 Fill T-63- 6EM 6.23.83

### IL 532-610 LPC 62 8/81

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217), 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number

MILES LABORATORIES (Company Name)	195 W. BIRCH ST. 19 8 1	5 9 3 7 8 2 7 0 14	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
KANKAKEE City	IL 60901 State Zip		D 0 4 8 9 5 5 9 5 9
	WASTE HAULER(S)		1, 1 1
NKAKEE INDUSTRIAL DISPOSA	L 1360 E. LOCUST Hauler Address	S.W.H. Regis	tration Number 0 0 6 6 0 1 2
nauter Name			L D 0 5 4 1 5 5 0 8 0
Hauler Name			stration Number
naulei Maille	Hauler Address		32 30
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AMEDICAN SERVICE	DESTINATION — DISPOSAL STORAGE OF	R TREATMENT SITE	0.7.0.6.0.0.0
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE. & C & O R.R.		9 1 8 6 8 9 0 2 Sile Number 46
GRIFFITH	•	210021127	
City	IN 46319 State Zip	219924437 Phone Number	EPA Number
0.17	,	r none wamber	1
Alternate (Facility Name)	Address		39 Site Number 46
City :	State Zip	Phone Number	EPA Number
TO BE COMPLETED BY	2.5	Those Names	CI A Mande
WASTE GENERATOR WASTE NAME:	ACETONE & CONTAMINATES	WASTE PHASE:	LIQUID 👌
	HIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION I		(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION:	HAZARD CLASS:		
	: 	UN 1 0 9 0	<u>U002</u>
WASTE ACETONE			EPA HW Number
WEIGHT FOR 31, 400 (185) D.O.T. USE 31, 400 TONS (circle or	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	OF WASTE DELIVERED: 0	GALLONS Circle One) 2 CU. TOS. 1
METHOD OF SHIPMENT (Circle One) (I	DRUMSOPEN TRU	UCK OTHER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WAS IN ACCORDANCE WITH THE APPLICABLE REGULATIO	TE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. N INS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION A	MARKED, AND LABELED AND IS IN PROPE	R CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRIT	TEN INFORMATION Almona	Virber	DATE: 7/20/83
<u></u>	// (Author	ized Signature)	
WASTE HAULER I HEREBY CERTIFY THAT THE DESTINATION AS IN	T THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEE NDICATED:	EN ACCEPTED IN PROPER CONDITION FOR	TRANSPORT AND I ACKNOWLEDGE
1 Teny d'auren			DATE: 7 20 83
(Authorized Signature)		•	3,
(2)	<del></del>	. *	DATE:
(Authorized Signature)			
DISPOSAL, STORAGE, OR TREATMENT FACILITY		HAZARDOUS WASTE SE	JBJECT TO FEE YESNO
I HEREBY CERTIFY THAT THE ABOVE DESTRIBED W	ASTERNO IN ACATED QUANTITY HAS BEEN ACCEPTED AT	THE SITE SPECIFIED ABOVE:	7 2083
(Authorized Signature)	<del>/</del>		DATE: 60
COMMENTS OR SPECIAL INSTRUCTIONS:			
	"24 HOUR EMERGENCY AND SPILL AS:	SISTANCE NUMBERS*	TODG II UNDIS: 900 / 424-9902 cc 002 / 406 0076
IN ILLINOIS. 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART -	- 2 IEPA PART - 3 SITE PART - 4 HAULER	PART - 5 IEPA PART 6 - GENE	TSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 RATOR
REV. # 4			

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

0791	643
1	,

Authorization Number

DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

KANKAKEE  City  State  AKEE INDUSTRIAL DISPOSAL 1360 F  Hauler Name  Hauler Addres  Hauler Name  Hauler Addres  Col Fax  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  WASTE ACETONE  FLAMMAB	S  TINATION — DISPOSAL  Address  Address		S.W.H. Registration  S.W.H. Registration	EPA Number  9 1 8 0 8  39 Site Number	9 5 9 6 0 1 <del>\$</del> 0 8 0
City  State  AKEE INDUSTRIAL DISPOSAL 1360 F. Hauler Address  Hauler Name  Hauler Name  Hauler Address  COLFAX.  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX.  STEE GENERATOR  WASTE NAME: ACETONE & COLFAX.  SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  STE 10 CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLA CORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	Zip WASTE  LOCUST S  8  TINATION — DISPOSAL  AVF & C & C  Address  46  Address	Phone Number  Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  R.R.	S.W.H. Registratio	D 0 5 4 1 5 5 1 EPA Number 32 EPA Number 32 Site Number 39 Site Number 39 Site Number 39 Site Number 39 1 8 0 8	6.0.1 <del>\$</del> 0.8.0
Hauler Name  Hauler Name  Hauler Addres  Teach CHEMICAL SERVICE  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX  Alternate (Facility Name)  WASTE NAME:  ACETONE & COLFAX  ACETONE & COLFAX  ACETONE & COLFAX  SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE SHIPPING DESCRIPTION:  HAZARD CLASS:  WASTE ACETONE  FLAMMABI  SHIF FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (CIRCLE ONE)  ACETONE  FLAMMABI  STEED TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLA  CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	S  TINATION — DISPOSAL  Address  Address	Phone Number  Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  R.R.	S.W.H. Registratio	D 0 5 4 1 5 5 1 EPA Number 32 EPA Number 32 Site Number 39 Site Number 39 Site Number 39 Site Number 39 1 8 0 8	6.0.1 <del>\$</del> 0.8.0
Hauler Name  Hauler Name  Hauler Address  DES  ICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & CI SHIPPING DESCRIPTION:  WASTE ACETONE  FLAMMAB:  WASTE ACETONE  FLAMMAB:  WEIGHT FOR 1 CONVERTED TI  ONVERTED TO  Number  SITE TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLA CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	S  TINATION — DISPOSAL  Address  Address	Phone Number  Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  R.R.	S.W.H. Registratio	D 0 5 4 1 5 5 on Number 32 EPA Number EPA Number 32 Site Number 39 9 1 8 0 8 Site Number 39 Site	0.8.0
Hauler Name  Hauler Name  Hauler Address  DES  ICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & CI SHIPPING DESCRIPTION:  WASTE ACETONE  FLAMMAB:  WASTE ACETONE  FLAMMAB:  WEIGHT FOR 1 CONVERTED TI  ONVERTED TO  Number  SITE TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLA CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	S  TINATION — DISPOSAL  AVE & C & C  Address  Address	Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  D. R.R.	S.W.H. Registratio	D 0 5 4 1 5 5 on Number 32 EPA Number EPA Number 32 Site Number 39 9 1 8 0 8 Site Number 39 Site	0.8.0
TOTAL SERVICE  (Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  State  ACETONE & COLFAX  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX  ACETONE & COLFA	S TINATION — DISPOSAL  AVE & C & C  Address  Address	Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  D. R.R.	S.W.H. Registratio	D 0 5 4 1 5 5 on Number 32 EPA Number EPA Number 32 Site Number 39 9 1 8 0 8 Site Number 39 Site	0.8.0
COLFAX  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX  IN  State  Alternate (Facility Name)  City  State  WASTE GENERATOR  WASTE NAME: ACETONE & COLFAX  STATE GENERATOR  WASTE ACETONE  FLAMMAB  SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (CIRCLE ONE)  STATE OF THE ABOVE NAMED WASTE ARE PROPERLY CLA  CCORDANCE WITH THE ABOVE WRITTEN INFORMATION  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	TINATION — DISPOSAL  AVE & C & C  Address  Address	Phone Number  Phone Number  STORAGE OR TREATMENT SITE.  D. R.R.	S.W.H. Registratio	EPA Number  EPA Number  Site Number	
COLFAX  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX  IN  State  Alternate (Facility Name)  City  State  WASTE GENERATOR  WASTE NAME: ACETONE & COLFAX  STATE GENERATOR  WASTE ACETONE  FLAMMAB  SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (CIRCLE ONE)  STATE OF THE ABOVE NAMED WASTE ARE PROPERLY CLA  CCORDANCE WITH THE ABOVE WRITTEN INFORMATION  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	TINATION — DISPOSAL  AVE & C & C  Address  Address	STORAGE OR TREATMENT SITE.		EPA Number  9 1 8 0 8  39 Site Number	38 
COLFAX  (Facility Name)  GRIFFITH  City  State  Alternate (Facility Name)  City  State  ACETONE & COLFAX  IN  State  Alternate (Facility Name)  City  State  WASTE GENERATOR  WASTE NAME: ACETONE & COLFAX  STATE GENERATOR  WASTE ACETONE  FLAMMAB  SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (CIRCLE ONE)  STATE OF THE ABOVE NAMED WASTE ARE PROPERLY CLA  CCORDANCE WITH THE ABOVE WRITTEN INFORMATION  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	TINATION — DISPOSAL  AVE & C & C  Address  Address	STORAGE OR TREATMENT SITE.		EPA Number  9 1 8 0 8  39 Site Number	902
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CITY STATE  Alternate (Facility Name)  City State  Alternate (Facility Name)  City State  ACETONE & CI  SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF TO SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUMS Number)  METHOD OF SHIPMENT (CIRCLE ONE) (DRUMS Number)  SIS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLA CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	Address 46		4 4 3 7 0		902
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Alternate (Facility Name)  City State  SE COMPLETED BY STE GENERATOR  WASTE NAME: ACETONE & CI  SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF TO SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  SHIP FOR 38780 LBS TONS (circle one) WEIGHT FOR I CONVERTED TO STANSPORTED TO STANSPORTE	Address	Zip Phone Nu	mber .		6026
CITY  STATE GENERATOR  WASTE NAME: ACETONE & CO SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF TO SHIPPING DESCRIPTION: HAZARD CLASS:  WASTE ACETONE  FLAMMAB  SHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  SIS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLA CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D  REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION				EPA Number	
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SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE SHIPPING DESCRIPTION:  WASTE ACETONE  WASTE ACETONE  FLAMMAB  SHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (CIRCLE ONE)  SIS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLA CORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION					
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SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE SHIPPING DESCRIPTION:  WASTE ACETONE  FLAMMAB  GHT FOR 38780 LBS TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (CIRCLE ONE)  CONVERTED TO NUMBER  OF THE HALLES	ONTAMINATES	18/A	CTE DUACE:	LIOUID	4
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Number  S IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLA CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	TANK TRUCK	OPEN TRUCK OTHER (Sp	erity)		53
CCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS D REBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION	TAIL TAIL OF	Oren TABON : OTHER (Sp			
STE MAILED	SSIFIED, DESCRIBED. PA EPARTMENT OF TRANSF	ACKAGED, MARKED, AND LABELEI PORTATION AND I.E.P.A.	AND IS IN PROPER CO	INDITION FOR TRANSPORTATIO	N.
STE HAULER  I HEREBY CERTIFY THAT THE ABOVE-DESCRIB	12 M	MALLIAN	best	DATE: 2/1/0/8	13
STE HAULER  I HEREBY CERTIFY THAT THE ABOVE-DESCRIB		(Authorized Signature)			
	ED WASTE AND QUANTI	TY HAS BEEN ACCEPTED IN PROP	ER CONDITION FOR TRA	NSPORT AND I ACKNOWLEDGE	i
THE DESTINATION AS INDICATED:					
Coang Kill Inc				DATE: \$ 16	18 <u>≥</u>
Authorized Signature)		•		» <i>/</i>	/
(Authorized Signature)		100		DATE:	′ –
POSAL, STORAGE, OR TREATMENT FACILITY*			ADDOUG WASTE SUBJE	CT TO CCC . VCC	NO A
EREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED	QUANTITY HAS BEEN A	, A )	ARDOUS WASTE SUBJE ABOVE:	CITOFEE TES	, NO <del>/ Y</del>
Trunce				DATE	J 83
(Authorized Signature)				60	65
MENTS OR SPECIAL INSTRUCTIONS:					
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		THE RESIDENCE WAS ALLESSED OF THE SECOND OF			
LLINGIS: 217 / 782-3637 TRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART -	HOUR EMPROPRIATE	D SPILL ASSISTANCE NUMBERS* HAULER PART - 5 IEPA	PART 6 - GENERAT	E ILLINOIS: 800 / 424-8802 of	202 / 426-267

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

07	91	64	4
			7

Authorization Number

MILES LABORATORIES (Company Name)	195 W. BIF	RCH ST. 8 1	5 9 3 7 8 2 7 0	0 9 1 0 5 5 0 0 0 8 6 Generator Number 24
KANKAKEE	IL.	60901		D 0 4 8 9 5 5 9 5 9
City	State	Zip		EPA Number
WKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOCU	8159	jr -	ation Number 0 0 6 6 0 1 2 31  D 0 5 4 1 5 5 0 8 0  EPA Number
Hauler Name	Hauler Address •	<u> </u>	S.W.H. Registi	ration Number
inguist hame	naulet Aduless &	···		
	DESTINATIO	N — DISPOSAL STORAGE O	ONE NUMBER	EPA Number
AMERICAN CHEMICAL SERVICE	COLFAX AVE	ECEOR.		9 1 8 0 8 9 0 2 Sile Number 40
(Facility Name) GRIFFITH	IN Add	46319	219924437	
City	State	Zip	Phone Number	EPA Number
Alternate (Facility Name)	Ado	ress	-	39 Site Number 46
City	State -	Zip	Phone Number	EPA Number
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR 38 6 40 TONS (circle on METHOD OF SHIPMENT (Circle One) (D. THIS IS TO CERTIFY THAT THE ABOVE-NAMED WAST IN ACCORDANCE WITH THE APPLICABLE REGULATION I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	WEIGHT FOR I.E. P.A. CONVERTED TO CU. Y  RUMS	USE MUST BE OUANTITY DS. OR GAL. OPEN TR  DESCRIBED. PACKAGED. PAC	UN 1 0 9 0 UN OF NA NUMBER  OF WASTE DELIVERED: 47  UCK OTHER (Specify)  MARKED, AND LABELED AND IS IN PROPER	53
(Authorized Signature)  I HEREBY CERTIFY THAT THE DESTINATION AS IN  (Authorized Signature)		TE AND QUANTITY HAS BEI	EN ACCEPTED IN PROPER CONDITION FOR T	RANSPORT AND I ACKNOWLEDGE  DATE: $\frac{8}{54}$ $\frac{23}{56}$
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	1	<del>-</del>	HAZARDOUS WASTE SUE	NECT TO FEE YES NO
(Authorized Signature)	STE AND INDICATED QUANTI	TY HAS BEEN ACCEPTED A	T THE SITE SPECIFIED ABOVE:	DATE: 8/23/83
	*24 HOUR	EMERGENCY AND SPILL AS	SISTANCE NUMBERS*	NOT 11 INCIG. 200 / 424 2000 - 200 / 422 200
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART -		PART 4 HAULER	PART - 5 IEPA PART 6 - GENER	SIDE ILLINOIS. 800 / 424-8802 or 202 / 426-267 ATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

0791645

	SPEC	782-6760) CIAL WASTE HAULING	MANIFEST	Authorization Number	8
MILES LABORATORIES	105 W 811	ocu er . 0 :		0 00705	50000
(Company Name)	195 W. BII	KUH 51. 0.	1 5 9 3 7 8 2 7 Phone Number	0 9 1 0 5 Genera	5 0 0 0 8 G or Number 24
KANKAKEE	IL	_60901		I L D O 4 8	955959
City	State	Zip		ILDO48	mber
•		WASTE HAULER(S)			
ANKAKEE INDUSTRIAL DISPOSA	L 1360 E. LO	YUST	c ·	W.H. Registration Number	0066012
Hauler Name	Hauler Address	- <del></del>		W.H. Registration Number	<b>J</b> .
			3 3 2 9 3 1		1 5 5 0 8 0
		7110		W.H. Registration Number	71 110111001
Hauler Name	Hauler Address		3.	32	38
		<u></u>	one Number		PA Number
	DESTINAT	ION — DISPOSAL STORAGE D			·
AMERICAN CHEMICAL SERVICE	COLFAX AVE	& C & O R.R.	_	9	1 8 0 8 9 0 2
(Facility Name)		ddress			
GRIFFITH City	IN	<u>46319</u>	2 1 9 9 2 4 4	<u> 3 7 0 _ I N D O</u>	16360265 PA Number
,	0.0.0	2.17		•	·
Alternate (Facility Name)	A	ddress	-	799	Site Number 46
		<u> </u>	<u> </u>	<u> </u>	
TO BE COMPLETED BY	State	Zip	Phone Number		PA Number
WASTE GENERATOR	ACETONE & CO	ATAMINATES		.se. LIO	IID
			_ WASTE PHA	(Liquid C	seous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE SHIPPING DESCRIPTION:	HAZARD CLASS:	JI HAZAKU CLASSIFICATIUN I	NUICATED IMMEDIATELY BELC	IW:	,
146TT 46TT0+T		_!	<u>J N 1 0 9 0</u> UN or NA Number	EPA HW Numbe	<u>)</u> 2
WASTE ACETONE	FLAMMABLE	<del></del>	-		
WEIGHT FOR 40,090 LBS DO.T. USE 6 Circle one	WEIGHT FOR I.E.P.A	. USE MUST BE QUANTITY	OF WASTE DELIVERED	03000	1 GALLONS Circle One) 2 CU. YDS. 1
• /		<u> </u>			53
METHOD OF SHIPMENT (Circle One) (DR	UMS)	TANK TRUCK OPEN TRI	UCK OTHER (Specify) _		<del></del>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASSIFIE	D. DESCRIBED. PACKAGED. N	MARKED, AND LABELED AND IS	IN PROPER CONDITION FOR T	RANSPORTATION,
•		MENT UPTRANSPORTATION	Harber	·	16/83
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION	// (Author	izėd Signature)	DATE:	
WASTE HAULER I HERERY CERTIES THAT	THE AROVE-DESCRIBED W	STE AND CHANTITY HAS BEE	N ACCEPTED IN PROPER COND	STION FOR TRANSPORT AND I	ACKNOWI EDGE
THE DESTINATION AS IND			•		
which such G	opus			DATE	7_16_1 83
(Authorized Signature)	7	-		UATE:	59
(2)	<u></u>	A		DATE:	
(Authorized Signature)	<u> </u>				
DISPOSAL, STORAGE, OR TREATMENT FACULTY*	A:		. HAZARDOUS	WASTE SUBJECT TO FEE Y	ES NO
I HEREBY CERTIFY THAT THE ABOVE-DEACHBE WAS	STE AND NUICATED QUAN	TITY HAS BEEN ACCEPTED AT	THE SITE SPECIFIED ABOVE:	_	1/1
(Authorized Squate)	WILL			DAT	1-6-8-5
(nominated years)	1100	<del></del>			
COMMENTS OR SPECIAL INSTRUCTIONS:	<u> </u>	<del></del>		<del></del> -	<del></del>
		<del></del>			<del></del>
IN ILLINOIS: 217 / 782-3637	*24 HOU	R EMERGENCY AND SPILL AS	SISTANCE NUMBERS*	OUTSIDE ILI INOIS: 800	/ 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2	IEPA PART - 3 SITE	PART - 4 HAULER	PART - 5 IEPA PAI	RT 6 - GENERATOR	

REV. # 4

#### **STATE OF ILLINOIS**

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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1	

,	<i>°</i> 00, s		82-6760 AULING MANIFEST	Authorization	Number	<del></del> -
MILES LABORATORIES	_ 195 W. B		8 1 5 9 3 7 8 2 Phone Number	70 09:1	0 5 5 0 0 Generator Number	0.8
(Company Name)  KANKAKFF		dress	Phone Number			
City	State	_ <u>60901</u>	-	ILDC	4 8 9 5 5 EPA Number	9 <u>5</u> 9.
· · · · · · · · · · · · · · · · · · ·			HAULER(S)		e silv	•
KAKEE INDUSTRIAL DISPOSA	L 1360 E.	OCIET.	4.		2.2.6	
Hauler Name	Hauler Address	LUCUS I	A.,	S.W H. Registration Nur	nber06_	5_0_1
		_8_	159332931 Phone Number		0 5 4 1 5 5 EPA Number	080
Hauler Name	Hauler Address	<del></del>	·	S.W.H. Registration Nu	mber	
			Phone Number		EPA Number	
			STORAGE OR TREATMENT SITE			
MERICAN CHEMICAL SERVICE (Facility Name)	COLFAX	AVE. & C &	<u>O R.R.</u>		9 1 8 0 8 Site Numb	9_Q_2
GRIFFITH City	State		6319 2 1 9 9 2 4 Zip Phone Number	43701	N D O 1 6 3 EPA Number	602
Alternate (Facility Name)		Address	13		39 Site Numb	er
City	State	<del></del>	Zip Phone Number		EPA Number	
SHIPPING DESCRIPTION:  WASTE ACETONE	HAZARD CLASS:	E LIQUID		<b></b>	0 0 2 w Number	
GIGHT FOR 38760 (B)		.P.A. USE MUST BE CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED.	0500	O 2 GALLON 2 CU: YOU	S)Circle On
METHOD OF SHIPMENT (Circle One) (DF	RUMS)	TANK TRUCK	OPEN TRUCK OTHER (Specify)			
IS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ACCORDANCE WITH THE APPLICABLE REGULATION	E ARE PROPERLY CLASS IS OF THE ILLINOIS DEF	SIFIED, DESCRIBED, PA	ORTATION AND I.E.P.A.		ON FOR TRANSPORTATION	on. 3.3
EREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION	Acon	Authorized Signature)	<u></u> DA	TE:	<u>,                                    </u>
ASTE HAULER I HEREBY CERTIFY THAT THE DESTINATION AS INC			TY HAS BEEN ACCEPTED IN PROPER CO	ONDITION FOR TRANSPO	RT AND I ACKNOWLEDGE	<del></del>
KiD Inc. Gea	y.	M. Torres	**************************************		DATE: 9 / 8	18
(Authorized Signature)					DATE:	<u>/ _</u>
SPOSAL, STORAGE, OR TREATMENT FACETY* HEREBY CERTIFY THAT THE ABOY BY SCOTTED WA	STE AND INCREATED OF	JANTITY HAS BEEN AC	HAZARDO CEPTED AT THE SITE SPECIFIED ABOV	OUS WASTE SUBJECT TO E:	FEE YES	NO_ ✓, <del>✓</del>
(Authorized Signature)	VKLL				DATE: 60	UU

PART - 5 IEPA PART - 2 IEPA PART - 3 SITE PART - 4 HAULER

SITE COPY - PART 3

PART 6 - GENERATOR

DISTRIBUTION PART - 1 GENERATOR

REV. # 4

TO BE COMPLETED BY WASTE GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

Authorization Number \_\_\_

MILES LABORATORIES	195 W. B	IRCH ST.	8 1 5 9 3 7 8 2	70 0	91055000	) 8 d
(Company Name)	Add	Iress	Phone Number			
City	State	60901		<u> </u>	D O 4 8 9 5 5 9	9_5_9_
		WASTE	HAULER(S)			
KEE INDUSTRIAL DISPOSAL	1360 E. L	OCUST		S.W.H. Registratio	n Number 0 0 6 6	·
Hauler Name	Hauler Address	8	150332031		_	
			1 5 9 3 3 2 9 3 1 Phone Number		D Q 5 4 1 5 5 (	<del></del> -
Hauler Name	Hauler Address	<del></del>		S W.H. Registration	on Number	
		_	Phone Number	<del>_</del> -	EPA Number	
	DESTI	NATION - DISPOSAL	STORAGE OR TREATMENT SITE		<del></del>	
MERICAN CHEMICAL SERVICE (Facility Name)	COLFAX	AVE & C & Address	O R.R.		9 1 8 0 8 Site Numbe	9 0 2
GRIFFITH City	IN State		21992 Zip Phone Num	4 4 3 7 O	INDO163	602
Alternate (Facility, Name)		Address			39 Site Number	<del></del>
City	State	<del></del>	Zip Phone Num	<del></del>	EPA Number	
E COMPLETED BY TE GENERATOR				· · ·		
GHT FOR LBS T. USETONS (circle one)			QUANTITY OF WASTE DELIVERED: _	0050	O O GALLONS	Circle One
METHOD OF SHIPMENT (Circle One) (DRI	UMS)	TANK TRUCK	OPEN TRUCK OTHER (Spec	ity)	· · ·	<del></del>
S IS TO CERTIFY THAT THE ABOVE-NAMED WASTE CCORDANCE WITH THE APPLICABLE REGULATIONS	ARE PROPERLY CLASS	SIFIED, DESCRIBED, PA	CKAGED, MARKED, AND LABELED	AND IS IN PROPER CO	NOITION FOR TRANSPORTATIO	N.
REBY AGREE TO AND CERTIFY THE ABOVE WRITTE		Soul	ras Ville	<b>!</b> /	DATE: 4/23/3	83
THE ABOVE WATER	N INFORMATION	<del>U</del>	(Authorized Signature)		DATE:	
STE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS INDI		WASTE AND QUANTIT	Y HAS BEEN ACCEPTED IN PROPER	CONDITION FOR TRA	NSPORT AND I ACKNOWLEDGE	
Jonian Rado	w				DATE: 9/13	<u>/ ε</u> .
(Authorized Signature)					~ <i>,</i>	·
(Authorized Signature)					DATE:	
POSAL, STORAGE, OR TREATMENT FACILITY*			HAZAF	OOUS WASTE SUBJE	CT TO FEE YES	NO
EREBY CERTIFY THAT THE ABOVE-DESCRIBED WAS	TE AND INDICATED Q	JANTITY HAS BEEN AC			/	1
(Authorized Signature)			· · · · · · · · · · · · · · · · · · ·		DATE:	
MMENTS OR SPECIAL INSTRUCTIONS:		<u></u> .				
LLINOIS: 217 / 782-3637			SPILL ASSISTANCE NUMBERS*		E ILLINOIS: 800 / 424-8802 or	202 / 426
ISTRIBUTION: PART - 1 GENERATOR PART - 2	IEPA PART - 3	SITE PART - 4:	HAULER PART - 5 IEPA	PART 6 - GENERATO	Jr.	

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 0791649

Authorization Number SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 195 W. BIRCH ST. 8 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 (Company Name) KANKAKEE IL 60901 I L D O 4 8 9 5 5 9 5 9 City State Zip WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W H. Registration Number 0.06.600 Hauler Name 8159332931 S.W.H. Registration Number Hauler Name Hauler Address Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE & C & O R R. GRIFFITH IN 199244370 INDO Alternate (Facility Name) Site Number Address City State Zip Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES WASTE NAME: WASTE PHASE: THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW SHIPPING DESCRIPTION: HAZARD CLASS: EPA HW Number U N 1 0 9 0 QUANTITY OF WASTE DELIVERED:  $\frac{\mathcal{O}}{2} \frac{\mathcal{O}}{2} \frac{$ WEIGHT FOR 🚑 WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. METHOD OF SHIPMENT (Circle One) TANK TRUCK OPEN TRUCK OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A. mach I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CENTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED DATE: 9/20/23 (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE ASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. I HEREBY CERTIFY THAT THE (Authorized S COMMENTS OR SPECIAL INSTRUCTIONS

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART - 3 SITE

PART - 2 IEPA

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR

#### STATE OF ILLINOIS

**ENVIRONMENTAL PROTECTION AGENCY** DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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7	- •	_,	_	_	_	_	7	-

Authorization Number SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 (Company Name) 60901 I L D O 4 8 9 5 5 9 5 9 KANKAKEE IL State EPA Number Zip WASTE HAULER(S) 1360 E. LOCUST KANKAKEE INDUSTRIAL DISPOSAL S.W H. Registration Number 0 0 6 6 0 1 1 Hauler Name <u>8159332931</u> ILD054155080 Hauler Name Hauter Address EPA Number Phone Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE SCSORR. AMERICAN CHEMICAL SERVICE CONFAR AVE. IND016360265 GRIFFITH IN Alternate (Facility Name) Address Site Number State EPA Number City Zio Phone Number TO BE COMPLETED BY WASTE GENERATOR LIQUID ACETONE & CONTAMINATES WASTE NAME: \_ WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: U 0 0 2 UN1090 UN or NA Number EPA HW Number FLAMMABLE LIQUID WASTE ACETONE WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. LBS TONS (circle one) WEIGHT FOR QUANTITY OF WASTE DELIVERED: 05 TANK TRUCK METHOD OF SHIPMENT (Circle One) OPEN TRUCK OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED. PACKAGED. MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E. (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: DATE: 69/13/83 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE DICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: (Authorized Signally COMMENTS OR SPECIAL INSTRUCTIONS: \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS: 217 / 782-3637 PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

0824197	
<u> </u>	

KANKAKEE IL  City State  CANKAKEE INDUSTRIAL DISPOSAL 1360 E  Hauler Name Hauler Ad  Hauler Name Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City S  TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION: HAZARO CLAS  WASTE ACETONE FLAMME  WEIGHT FOR D.O.T. USE TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUMS Number THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	BIRCH ST. Address 6090 Zip W/ LOCUST dress	Phone  8 1 5 9 3 3 2  Phone Number  Phone Number  Phone Number  Phone Number  Phone Number	3 7 8 2 7 0 Number S.W.H. F	I L D O 4  EPA  Registration Number	8 13  5 5 0 0 0 8 6  erator Number 24  8 9 5 5 9 5 9  Number 0 6 6 0 1 1  25 25 0 8 0  EPA Number
ANKAKEE IL  City State  ANKAKEE INDUSTRIAL DISPOSAL 1360 E  Hauler Name Hauler Ad  Hauler Name Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City S  TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION: HAZARO CLAS  WASTE ACETONE FLAMME  WEIGHT FOR D.O.T. USE TONS (circle one) WEIGHT FOR CONVERTE CONVERTE	Address  6090 Zip W/ LOCUST dress  DESTINATION — DISPO  Address N	Phone  8 1 5 9 3 3 2  Phone Number  Phone Number  Phone Number  Phone Number  Phone Number	S.W.H. F 931 S.W.H.	I L D O 4  EPA  Registration Number	8 9 5 5 9 5 9 Number  0 0 6 6 0 1 1  14 1 5 5 0 8 0  EPA Number
ANKAKEE INDUSTRIAL DISPOSAL 1360 E Hauler Name Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  Number  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	Address  6090 Zip W/ LOCUST dress  DESTINATION — DISPO  Address N	Phone  8 1 5 9 3 3 2  Phone Number  Phone Number  Phone Number  Phone Number  Phone Number	S.W.H. F 931 S.W.H.	I L D O 4  EPA  Registration Number	8 9 5 5 9 5 9 Number  0 0 6 6 0 1 1  14 1 5 5 0 8 0  EPA Number
ANKAKEE INDUSTRIAL DISPOSAL 1360 E  Hauler Name Hauler Ad  Hauler Name Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR D.O.T. USE  WEIGHT FOR TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	LOCUST  dress  DESTINATION — DISPO  FAX AVE. &  Address	ASTE HAULER(S)  8 1 5 9 3 3 2  Phone Number  Phone Number  SAL STORAGE OR TREATME  C & O R.R.	931 S.W.H.	EPA Registration Number	Number  0 0 6 6 0 1 1  4 1 5 5 0 8 0  EPA Number
ANKAKEE INDUSTRIAL DISPOSAL 1360 E Hauler Name Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: SHIPPING DESCRIPTION: HAZARO CLAS  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  CONVERTE  Number  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	DESTINATION — DISPO	Phone Number  Phone Number  Phone Number  OSAL STORAGE OR TREATME  C & O R.R.	931 S.W.H.	Registration Number _	0 0 6 6 0 1 1 4 1 5 5 0 8 0 EPA Number
Hauler Name  Hauler Ad  Hauler Ad  Hauler Ad  Hauler Ad  Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME: ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION: HAZARD CLAS  WASTE ACETONE  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	DESTINATION — DISPO	Phone Number  Phone Number  Phone Number  OSAL STORAGE OR TREATME  C & O R.R.	931 S.W.H.	I L D O 5	4_1_5_5_0_8_0_ EPA Number
Hauler Name  Hauler Ad  Hauler Ad  Hauler Ad  Hauler Ad  Hauler Ad  AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME: ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION: HAZARD CLAS  WASTE ACETONE  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	dress  DESTINATION - DISPO  FAX AVE & Address  N	Phone Number  Phone Number  SAL STORAGE OR TREATME  C & O R.R.	931 S.W.H.	I L D O 5	4_1_5_5_0_8_0_ EPA Number
AMERICAN CHEMICAL SERVICE  (Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARO CLAS  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  CONVERTE  Number  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	DESTINATION DISPO FAX AVE & Address	Phone Number  Phone Number  SAL STORAGE OR TREATME  C & O R.R.	931 S.W.H.	I L D O 5	4_1_5_5_0_8_0_ EPA Number
AMERICAN CHEMICAL SERVICE  (Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARD CLAS  WASTE ACETONE  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	DESTINATION — DISPO FAX AVE & Address	SAL STORAGE OR TREATME	<u>r</u>	Registration Number	
AMERICAN CHEMICAL SERVICE  (Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARD CLAS  WASTE ACETONE  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	DESTINATION — DISPO FAX AVE & Address	SAL STORAGE OR TREATME	<u>r</u>	<del></del>	
AMERICAN CHEMICAL SERVICE (Facility Name)  GRIFFITH City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION: HAZARO CLAS  WASTE ACETONE FI AMM WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	FAX AVE & Address	SAL STORAGE OR TREATME	NT SITE		EDA Number
AMERICAN CHEMICAL SERVICE  (Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  SOURCE  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARO CLAS  WASTE ACETONE  FI AMM  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	FAX AVE & Address	C & O R.R.	NT SITE		CEA NUMBER
(Facility Name)  GRIFFITH  City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARD CLAS  WEIGHT FOR D.O.T. USE  WEIGHT FOR TONS (circle one)  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY	Address			,	
City  Alternate (Facility Name)  City  TO BE COMPLETED BY WASTE GENERATOR  WASTE NAME:  ACETON  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS SHIPPING DESCRIPTION:  HAZARO CLAS  WASTE ACETONE  FI AMM  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  METHOD OF SHIPMENT (Circle One)  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE ARE PROPERLY				39	9 1 8 0 8 9 0 2 Site Number
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WASTE GENERATOR  WASTE NAME:  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS  SHIPPING DESCRIPTION:  HAZARD CLAS  WASTE ACETONE  LBS TONS (circle one)  WEIGHT FOR D.O.T. USE  METHOD OF SHIPMENT (Circle One)  Number  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY	late	Zip ·	Phone Number	<del>-</del>	EPA Number
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINO	IS DEPARTMENT OF TR	BE QUANTITY OF WASTE  OPEN TRUCK  D. PACKAGED, MARKED, A	OTHER (Specify)	* *	GALLONS Circle One) 2 CU. YDS. 1 s3
WASTE HAULER  I HEREBY CERTIFY THE ABOVE WRITTEN INFORMATION  WASTE HAULER	7/	(Authorized Signat	ure)	DATE:	D LACKNOW! SDGF
THE DESTINATION AS INDICATED:  (1) (Authorized Signature)  (2) (Authorized Signature)					9 <u>130</u> 183
DISPOSAL, STORAGE, OR TREATMENT FACILITY			11.31.000.00		VES 110 V
-1 HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICAL  (Authorized Signature)  COMMENTS OR SPECIAL INSTRUCTIONS:	TED QUANTITY HAS BEI	EN ACCEPTED AT THE SITE		DATE:	4130 E
IN ILLINOIS, 217 / 782-3637		CY AND SPILL ASSISTANCE	NUMBERS*	OUTSIDE ILLINOIS	800 / 424-8802 or 202 / 426-2

REV. # 4

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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Authorization Number

	SPE	CIAL WASTE HA	AULING MANIFEST		•	.,
MILES LABORATORIES	195 W. BI	RCH ST.	8-1 5 9 3 7 8 2	<u>7</u> 0 0	9105500	0 8 6
(Company Name) KANKAKEE	Addre I L	60901	Phone Number	- 14 - I I	Generator Number	5 9 5 9
City	State	Zip			EPA Number	
	<del></del>	WASTE H	HAULER(S)			
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LO	CIRT			0066	1511
Hauler Name	Hauler Address				tion Number 0 0 6 6	
<b>.</b>		<u> </u>	1 5-9 3 3 2 9 3 1 Phone Number	1 1	D 0 5 4 1 5 !	
				S.W.H. Registra	tion Number	
Hauler Name	Hauler Address		~		. 32	36
*	· 4		Phone Number		EPA Number	
AMEDICAN CHEMICAL SERVICE			TORAGE OR TREATMENT SITE		0.3.9.0	0 0 0 0
AMERICAN CHEMICAL SERVICE (Facility Name)		E. & C & C Address	) K.R.		9 1 8 0 39 Site Nui	8 9 0 2 nber 46
GRIFFITH	IN	46	5319 219924	4370	INDO16	3,6026
City	State		Zip Phone Number		EPA Number	
Alternate (Facility Name)		Address	<del>**</del>		39 Site Nu	mber 46
TO BE COMPLETED BY	State		Zip Phone Number		EPA Number	
WASTE GENERATOR WASTE NAME:	ACETONE & C	ONTAMINATE	ES WASTE P	PHASE.	LIQUID	
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE	S MANIFEST IS OF THE I	OT HAZARD CLASSI	<del></del>		(Liquid, Gaseous, Soli	d)
SHIPPING DESCRIPTION:	HAZARD CLASS:		<i></i>			
WASTE ACETONE	EI ALMAADI E	LTOUTD	U N 1 0 9 0	-	EPA HW Number	
MASIC ACLIONE	FLAMMABLE		••	10.50	- tweet	ONS (Circle One)
WEIGHT FOR LBS TONS (circle one)	WEIGHT FOR I.E.P. CONVERTED TO CU	A. USE MUST BE . YDS. OR GAL.	QUANTITY OF WASTE DELIVERED: $\frac{C}{47}$	050	2 CU.	705. 1
METHOD OF SHIPMENT (Circle One) (OR	ums) (	TANK TRUCK	OPEN TRUCK OTHER (Specify)	· <del></del>		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE	Number	IED OCCOMBED OF	CYACED MADVED AND TADELED AND	) IS IN DOODED (	PONDITION FOR TRANSPORTA	TION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPAR	TMENT OF TRANSPO	ORTATION AND I.E.P.A.		Jet Jet Inanspunja	100
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTS	N INFORMATION	Store	(Authorized Signature)		DATE: C. C.	/ 4 2
WASTE HAULER	<del></del>	<del></del>	(Authorized Signature)			
I HEREBY CERTIFY THAT THE DESTINATION AS IND		ASTE AND QUANTIT	Y HAS BEEN ACCEPTED IN PROPER CO	INDITION FOR TR	IANSPORT AND I ACKNOWLE	DGE
KIF L. W.	(				10.10	ul & 2
(1) (Authorized Signature)	(K 1/2)				DATE: 1 C/C	4 8 3
(2)	· -				DATE:	<./
(Authorized Signature)			* *			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			· HAZARDO	US WASTE SUB.	JECT TO FT	$\sim$ $\stackrel{\checkmark}{\checkmark}$
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	TE AND INDICATED QUA	NTITY HAS BEEN AC	CEPTED AT THE SITE SPECIFIED ABOV	E:		7
(Authorized Signature)	fee.		2.7			•
			16			
COMMENTS OR SPECIAL INSTRUCTIONS:		<del> </del>				
		<del> </del>	<del></del>			
IN ILLINOIS. 217 / 782-3637	*24 HC	UR EMERGENCY AN	D SPILL ASSISTANCE	•.	The second second	
DISTRIBUTION PART - 1 GENERATOR PART - 2	IEPA PART - 3 ST	E PART - 4 H	HAULER			
REV. # 4	<del>_</del>			4.4		

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

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MILES LABORATORIES	195 W. BIRCH 5	r. 8159378	270	0910	55000	8 (
(Company Name)	Address	Phone Number			tor Number	2.
KANKAKEE		901		I L D O 4		59
City	State Z	ip		EPA No	ımber	
		WASTE HAULER(S)				
KAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST		S W H Re	gistration Number 25	0660	1 /
Hauler Name	Hauler Address					
		8 1 5 9 3 3 2 9 3 Phone Number		-	PA Number	8 0
Hauler Name	Hauler Address	:	S.W H. Re	gistration Number		
	,			•		
		Phone Number	_		PA Number	
		SPOSAL STORAGE OR TREATMENT SITE		······································		
AMERICAN CHEMICAL SERVICE (Fácility Name)	COLFAX AVE. &	C & O R.R.		9_1	. 8 0 8 9 Site Number	0_2
		16000 0 3 0 0 0				
GRIFFITH	IN	46319 2 1 9 9 2		OINDC	PA Number	0_2
S.N.y	·	Zip mone w			i A Mainbei	
Alternate (Facility Name)	Address	· ·		39 —	Site Number	
City	State	Zip Phone N	lumber		PA Number	
TO BE COMPLETED BY						
SHIPPING DESCRIPTION: WASTE ACETONE	HAZARD CLASS:  FLAMMARI E LIQU			EPA HW Numbe	er	ircle On
WASTE ACETONE WEIGHT FOR 6356 () LBS TONS (circle one)	FLAMMABLE LIQUE WEIGHT FOR I.E.P.A. USE MU CONVERTED TO CU. YDS. OR	ID UN OF NA NUMBER  ST BE GAL. QUANTITY OF WASTE DELIVERE	00 0000	u_o_o	2	ircle On
SHIPPING DESCRIPTION: WASTE ACETONE	FLAMMABLE LIQUE WEIGHT FOR I.E.P.A. USE MU CONVERTED TO CU. YDS. OR	ID UN OF NA NUMBER OF WASTE DELIVERE	00 0000	EPA HW Numbe	2	ircle On
SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR 6356() LBS (circle one)  METHOD OF SHIPMENT (Circle One) (DRU  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE	HAZARD CLASS:  FI AMMABLE L IQLI  WEIGHT FOR I.E.P.A. USE MU CONVERTED TO CU. YOS. OR  JMS	ID UN OF NA NUMBER STATE OF WASTE DELIVERE  CK OPEN TRUCK OTHER (S	0: <u>0</u> 0 © pecity)	EPA HW Numbe	2 GALLONS CO 2 CU. YOS.	ircle On 1 53
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SHIPPING DESCRIPTION:  WASTE ACETONS  WEIGHT FOR 63560 TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRU  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	HAZARD CLASS:  FI AMMABLE LIQUI  WEIGHT FOR I.E.P.A. USE MU CONVERTED TO CU. YDS. OR  JMS	UN OF NA NUMBER  ST BE QUANTITY OF WASTE DELIVERE  CK OPEN TRUCK OTHER (S  RIBED, PACKAGED, MARKED, AND LABELE  TRANSPORTATION AND L.E.P.A.	pecity)	EPA HW Number 52 52  PER CONDITION FOR T	1 GALLONS &C 2 CU. YOS.	ircle On
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SHIPPING DESCRIPTION:  WASTE ACETONE  WEIGHT FOR 35 ( ) LBS D.O T. USE 63 5 ( ) TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRU  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN  WASTE HAULER  I HEREBY CERTIFY THAT TI THE DESTINATION AS INDICATED  (Authorized Signature)  (2)  (Authorized Signature)	HAZARD CLASS:  FI AMMARI F L TOLI  WEIGHT FOR I.E.P.A. USE MU CONVERTED TO CU. YDS. OR  JMS	UN OF NA NUMBER  ST BE GAL.  OPEN TRUCK  OTHER (S  RIBED, PACKAGED, MARKED, AND LABELE TRANSPORTATION AND L.E.P.A.  (Authorized Signature)  OUANTITY HAS BEEN ACCEPTED IN PROI	pecity)  DED AND IS IN PROPER CONDITION FO	PER CONDITION FOR T  DATE:  DATE:  DATE:  DATE:	GALLONS C 2 CU. YOS. RANSPORTATION	3
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#### **STATE OF ILLINOIS**

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 0824200

,	SPECIAL	(217) 782-6760 . WASTE HAULING M	AANIFEST	Authorization Number	
MILES LABORATORIES	195 W. BIRCH	; <b>(</b>	•	); 0910550	8000
(Company Name)	Address		Phone Number	U 9 1 U 5 5 U	
KANKAKEE		60901	FHORE HUMBER	ILD04895	
City	State	Zip	-	EPA Number	
	5.00	WASTE HAULER(S)		Era number	
	7.7(0 =	. ,	~ *		
NKAKEE INDUSTRIAL DISPOSAL		<u>05 l</u>	S.W.	H. Registration Number 25	066012
Hauler Name	Hauler Address	91500		25	
	.*	5 1 5 9 3 Phone	3 <u>3 2 9 3 1</u> Number	EPA Nu	mber
			S.W.	H. Registration Number	
Hauler Name	Hauter Address -	•		32	20
• • •		Phone	e Number	EPA Nu	ımber — — — —
	DESTINATION -	- DISPOSAL STORAGE OR	TREATMENT SITE		1
AMERICAN CHEMICAL SERVICE (Facility Name)	COLFAX AVE		<b>.</b>	<u> 9 1 8</u>	3 0 8 9 0 2
<b>N</b> ,	Addres		21002111		and the second second second
GRIFFITH City	State	_ <u>46319</u> - <del>کابر کابر</del>	2 1 9 9 2 4 4 1	3 7 0 I N D O 1	_ ~~ ~ ~ ~ ~
Y			The state of the s		, · · · · · · · · · · · · · · · · · · ·
Alternate (Facility Name)	Addres	55		<del>39</del> — S	ite Number 46
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O BE COMPLETED BY	State	Zip .	Phone Number	. EPA NI	nuner ;
VASTE GENERATOR WASTE NAME:	'ACETONE & CONT	•	WASTE PHASE	LIQUID	
WASTE ACETONE  SEIGHT FOR 3 / 7 70 TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRU  HIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A  ACCORDANCE WITH THE APPLICABLE REGULATIONS	Number  ARE PROPERLY CLASSIFIED, D  OF THE ILLINOIS DEPARTMEN	E MUST BE QUANTITY OF TRUCK OPEN TRUCK	RKED, AND LABÉLED AND IS II		GALLONS (Circle One) CU. YUS. 1 SO PORTATION.
HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION	(Authorize	ed Signature)	DATE:	
WASTE HAULER I HERERY CERTIFY THAT T	HE ABOVE-DESCRIBED WASTE	AND DUANTITY HAS BEEN	ACCEPTED IN PROPER CONDIT	ION FOR TRANSPORT AND I ACKN	OWLEDGE .
. THE DESTINATION AS INDI		· <del>·</del>	7-5 · 5 · 0		
KA LOS	¥1 114 1				1,0103
(Authorized Signature)	<del></del>	. ,	•	DATE: / /	1081 83
7			•	DATE: •/	1 /
(Authorized Signature)		· · ·			
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	<u> </u>	<u> </u>	HAZARDOUS W	ASTE SUBJECT TO FEE YES	NO
HEREBY CERTIFY THAT THE ABOVE DESCRISED WAS	TE AND I DICATED QUANTITY	HAS BEEN ACCEPTED AT T	HE SITE SPECIFIED ABOVE:	:	# E.
JULY	Walley -			DATE:	/ \$ _/ C
(Authorized Signature)	<i></i>			· 60	65
OMMENTS OR SPECIAL INSTRUCTIONS:	<u> </u>				
					···
N ILLINOIS 217 / 782-3637		MERGENCY AND SPILL ASS		OUTSIDE ILLINOIS: 800 / 42	4-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 I	EPA PART - 3 SITE	PART - 4 HAULER	PART - 5 IEPA PART	6 - GENERATOR	
ht. 7 7					

TO BE COMPLETED BY

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 0824201

WASTE GENERATOR 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 Authorization Number (217) 782-6760 SPECIAL WÄSTE HAULING MANIFEST MILES LABORATORIES 195 W. BIRCH ST. 9 1 5 9 3 7 8 2 7 0 0 9 1 0 5 5 0 0 0 8 Generator Number (Company Name) Address KANKAKEE IL 60901 I L D O 4 8 9 5 5 9 5 9 5 9 State Zip WASTE HAULER(S) S.W.H. Registration Number 0 0 6 6 5 1 2 1360 E. LOCUST : KANKAKEE INDUSTRIAL DISPOSAL Hauler Address 8159332931 EPA Number S.W.H. Registration Number Hauler Name Hauler Address Phone Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 9 1 8 0 8 9 0 2 AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. (Facility Name) GRIFFITH IND01636026 IN 219924<u>437</u>0 State Site Number Alternate (Facility Name) Address State Phone Number EPA Number City Zip TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUID WASTE NAME: \_ WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: UN or NA Number WASTE ACETONE FLAMMABLE LIQUID QUANTITY OF WASTE DELIVERED: Q 0 5 0 0 0 WEIGHT FOR 3 WEIGHT FOR I.E.P.A. USE MUST BE (1BS) 600 CONVERTED TO CU. YDS. OR GAL. D.O.T. USE 놀 TONS (circle one) TANK TRUCK **OPEN TRUCK** OTHER (Specify) METHOD OF SHIPMENT (Circle One) (DRUMS\_ Number THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED: (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY" HAZARDOUS WASTE SUBJECT TO FEE I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. (Authorized Signature) COMMENTS OR SPECIAL MOTINICATIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 IN ILLINOIS, 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 3 SITE PART - 5 IEPA PART 6 - GENERATOR PART - 2 IEPA PART - 4 HAULER

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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	•	(217) 78 (217) 78 CIAL WASTE HA	Authorization Number 8 13				
MILES LABORATORIES	195 W. BII	RCH ST.	81593	78270	0910	550008	G
(Company Name)	Addres	5	Phone	Number		nerator Number	24
KANKAKEE	<u> </u>	60901		_		895595	9
City	State	Zip `			EF	A Number	
		WASTE H	IAULER(S)			.*	
NKAKEE INDUSTRIAL DISPOSAL Hauler Name	1360 E. LOC	<u>UST</u>		′ S W.	H. Registration Number	00660	1 / 1
		8 2	1 5 9 3 3 2 Phone Number		<del>`</del>	EPA Number	<del></del> .
Hauler Name	Hauler Address		•	S.W.	H. Registration Number	32 — — —	38 -
	•						
			Phone Numbe	يه وخند حصوص		EPA Number	
AMERICAN CHEMICAL SERVICE	DESTINAT COLFAX AVE		TORAGE OR TREATME	INT SITE		918089	0.2
(Facility Name)		ddress			39	Site Number	
GRIFFITH	IN	463	319 219	992443	70 IND	01636	0265
City	State		Zip	Phone Number		EPA Number	
Alternate (Facility Name)	A A	ddress	-\$ 17 · · · · · · · · · · · · · · · · · ·	San San Comment	39	Site Number	
City	State		Zip	Phone Number		EPA Number	
TO BE COMPLETED BY WASTE GENERATOR		<del> </del>					
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS SHIPPING DESCRIPTION:  WASTE ACETONE WEIGHT FOR LBS	FLAMMABLE WEIGHT FOR I.E.P.A	LIQUID	UN OF NA	0 9 0 Number	<u>UO</u> EPA HW N		ircle One)
D.O.T. USETONS (circle one)			QUANTITY OF WASTE	DELIVERED:		_ 2 CU. YUS.	<u></u>
METHOD OF SHIPMENT (Circle One) (DRI	JMS) {	TANK TRUCK	OPEN TRUCK	OTHER (Specify)		<del></del>	-
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATIONS					PROPER CONDITION F	OR TRANSPORTATION	• ,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE		Sins	17 A Signal	ubor	DATE:	11/22/8	3
WACTE HALLED		1/	(Authorized Signal	urey			· · · · · · · · · · · · · · · · · · ·
I HEREBY CERTIFY THAT THE DESTINATION AS INDI	HE ABOVE-DESCRIBED W CATED:	ASTE AND QUANTIT	Y HAS BEEN ACCEPT	ED IN PROPER CONDITI	on for transport a	ND 1 ACKNOWLEDGE	
1) John Kadow	K·I·D	,- <del></del> '			DATI	1//22/	<u>8_3</u>
(Authorized Signature)					DATE	× / /	
(Authorized Signature)							<u>-</u>
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	1			HAZARDOUS W	ASTE SUBJECT TO FEE	YES	NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	TE AND INDICATED QUAN	TITY HAS BEEN AC	CEPTED AT THE SITE	SPECIFIED ABOVE:	DAT	. 11/24	183
(Authorized Signal Fre)	THE				UAT	<del></del>	65
COMMENTS OR SPECIAL INSTRUCTIONS.	//					<u>-</u>	
	<i>5</i> – –		•				· .

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

PART - 4 HAULER

PART - 3 SITE

SITE COPY-PART 3

PART - 2 IEPA

IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR

To #7 Still T-63 6CM 11.22.83

PART 6 - GENERATOR

PART - 5 IEPA

004240

OUTSIDE ILLINOIS. 800 / 424-8802 or 202 / 426-2675

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

0824203
<del></del>

. ,		ILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760	Authorization Number
•	SPECI	AL WASTE HAULING MANIFEST	•
MILES LABORATORIES (Company Name)	195 W. BIRC	H ST. 8 1 5 9 3 7 8 2 7	0 9 1 0 5 5 0 0 0 8 G Generator Number 24
KANKAKEE	IL	60901	ILD048955959
City	State	Zip	EPA Number
		WASTE HAULER(S)	:
ANKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCI	ST T	S.W.H. Registration Number $\frac{0}{25}$ $\frac{0}{6}$ $\frac{6}{6}$ $\frac{9}{1}$ $\frac{1}{31}$
Hauler Name	Hauler Address	8159332931	ILDO54155080
		Phone Number	
Hauler Name	Hauler Address	<del></del>	S.W.H. Registration Number 32 38
		Phone Number	EPA Number
	DESTINATIO	N — DISPOSAL STORAGE OR TREATMENT SITE	
AMERICAN CHEMICAL SERVICE (Fácility Name)		SCSORR.	9 1 8 0 8 9 0 2 0 2 0 0 2 0 0 2 0 0 2 0 0 0 0 0 0
GRIFFITH	IN State	46319 2 1 9 9 2 4 Phone Number	4 3 7 0 I N D 0 1 6 3 6 0 2 6
Alternate (Facility Name)	Add	iress	39 Site Number 46
City	State	· Zip Phone Number	EPA Number
WASTE ACETONE  WEIGHT FOR TO THE TOTAL THE TOT	FLAMMABLE L WEIGHT FOR I.E.P.A.		EPA HW Number  GALLONS (Circle One)
D.O.T. USETONS (circle one)	WEIGHT FOR I.E.P.A. I CONVERTED TO CU. Y		52 2 CU. YUS. 1
METHOD OF SHIPMENT (Circle One) (DRU	MS) TA	OPEN TRUCK OTHER (Specify)	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	OF THE ILLINOIS DEPARTM		1. 1. 10.
WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS INDIC	CATED:	TE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CO	
(1) Howard Line 200 (Authorized Signature)	to.	ward Kinneman	DATE: 12 02 83
(2) (Authorized Signature)		·	DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		HAZARDO	US WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE BOVE DESCRIBED WAS	E AND INDICATED QUANTI	TY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVI	DATE:
COMMENTS OR SPECIAL INSTRUCTIONS:			
IN ILLINOIS, 217 / 782-3637 DISTRIBUTION PART - 1 GENERATOR PART - 2 I		PART - 4 HAULER PART - 5 IEPA I	OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 PART 6 - GENERATOR

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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,	SPE	CIAL WÄSTE HA	ULING MANIFEST		8 13
MILES LABORATORIES	195 W. BIR	CH ST.	815937827	70 09105	5 5 0 0 0 8 <sub>G</sub>
(Company Name)	Addre		Phone Number	14 Gener	alor Number 24
KANKAKEE	IL	60901	•	ILD048	3955959
City	State	Zip		. EPA I	lumber
		WASTE H	AULER(S)		
KANKAKEE INDUSTRIAL DISPOS	AL 1360 E. L	OCUST			nén 6.6 m
Hauler Name	Hauler Address			S.W.H. Registration Number 2:	5 0 0 0 0 1 Z
. г		··· <u>*8</u> <u>1</u>	. 5 9 3 3 2 9 3 1 Phone Number	ILDOS	4155080 EPA Number
Hauler Name	Hauler Address			S.W.H. Registration Number	
Haulet Hame	Hadiel Address		•	3.	
			Phone Number		EPA Number
· · · · · · · · · · · · · · · · · · ·	DESTINA	ION — DISPOSAL SI	ORAGE OR TREATMENT SITE		
MERICAN CHEMICAL SERVICE	COLFAX AVE	8 C 8 O F	≀.R.	. 9	138 0 8 9 0 2
(Facility Name)		Address	<del></del>	39	1:18 0 8 9 0 2 Site Number 46
GRIFFITH	IN	46	319 219924	4370 IND	016360265
City	State	-	Zip Phone Number	 ·	EPA Number
	_				
Alternate (Facility Name)		ddress ·	<del></del>	39	Site Number 46
City		<u> </u>			
TO BE COMPLETED BY	State		ip Phone Number		EPA Number
WASTE GENERATOR WASTE NAME:	ACETONE & CO	WITAMINIATE	WASTE P	1.7	QUID
WASTE ACETONE  WEIGHT FOR D.O.T. USE TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DI	WEIGHT FOR I.E.P CONVERTED TO CU	A. USE MUST BE	UN OF NA NUMBER  UN OF WASTE DELIVERED:  OPEN TRUCK  OTHER (Specify)		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE IN ACCORDANCE WITH THE APPLICABLE REGULATION				IS IN PROPER CONDITION FOR	TRANSPORTATION,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT		. /	(Authorized Signature)	DATE:	12/6/83
WASTE HAULER		·····	······································	• • • • • • • • • • • • • • • • • • • •	<del></del>
(Authorized Signature)	DICATED:	. •	HAS BEEN ACCEPTED IN PROPER CO		/ 2/ 06/ 83/9
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			HA7A9DO	US WASTE SUBJECT TO FEE	VEC HO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WA	STE AND INDICATED QUAN	ITITY HAS BEEN ACC			12-6,83
COMMENTS OF SECOND INSTRUCTIONS	U	•			
COMMENTS OR SPECIAL INSTRUCTIONS:					
/	· <del>-</del>	<del></del> .			1
700 000	*24 40	IS EMERGENCY AND	SPILL ASSISTANCE NUMBERS*	OUTCODE IL LINOIS - O	00 / 424.9902 or 202 / 425.2525
217 / 782-3637 PART - 1 GENERATOR PART -			<del>`</del>	PART 6 - GENERATOR	00 / 424-8802 or 202 / 426-2675
FART SUBSTITUTE FART	1001 3311	. 7811, 481	iocon com order	o conclusion	

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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	SPECIAL	WASTE HAULING MANIFEST	Author	8
MILES LABORATORIES	195 W. BIRCH S	ST 815027	8270 0	0.10==0.008:
(Company Name)	Address	Phone Number	0210 14	9 1 0 5 5 0 0 0 8 ·
KANKAKEE	IL	50901	<u>I_</u>	D048955959
City	State	Zip		EPA Number
		WASTE HAULER(S)		
NKAKEE INDUSTRIAL DISPOSAL	1360 E. LOCUST	<u>r</u>	S.W.H. Registratio	on Number 0 0 6 6 0 1
Hauler Name	Hauler Address		• .	25
	•	8 1 5 9 3 3 2 9 3	<u>i ±                                     </u>	EPA Number
			S.W.H. Registratio	on Number
Hauler Name	Hauler Address		•	32
• •		Phone Number		EPA Number
	DESTINATION —	DISPOSAL STORAGE OR TREATMENT SITE		<del></del>
MERICAN CHEMICAL SERVICE	COLFAX AVE. 8	C & O R.R.		91808902
(Facility Name)  GRIFFITH	Address			•
City	State	46319 2 1 9 9 2	. 4 4 3 / U ]	I N D 0 1 6 3 6 0 2
	•	•	•	. •
Alternate (Facility Name)	Address	<del></del>		39 Site Number
City	State	Zip Phone	Number	EPA Number
O BE COMPLETED BY		Lip ( none	·	C. A. Compan
MEIGHT FOR 39, 850 TONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRU  THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS  HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	Number  ARE PROPERLY CLASSIFIED, DES OF THE ILLINOIS DEPARTMENT	MUST BE QUANTITY OF WASTE DELIVER  TRUCK OPEN TRUCK OTHER  SCRIBED, PACKAGED, MARKED, AND LABE	(Specify)	
		ND QUANTITY HAS BEEN ACCEPTED IN PR	OPER CONDITION FOR TRAI	NSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDIC				
1) Kerth Kaden (Kert	1. Kadow)			DATE: 1 2/14/8
(Authorized Signature)				1 1
(Authorized Signature)	<del></del>	e.	•	DATE:
DISPOSAL STORAGE OR TREATMENT FACILITY*		<u></u>	IAZARDOUS WASTS OVER	מד זה נדני ענה אים
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAS	THE AND INDICATED QUANTITY H		IAZARDOUS WASTE SUBJEC ED ABOVE:	CT TO FEE YES NO
(Authorized Signature)		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
COMMENTS OR SPECIAL INSTRUCTIONS:				
			-	
IN ILLINOIS 217 / 782-3637	*24 HOUR EME	RGENCY AND SPILL ASSISTANCE NUMBER	0015100	E ILLINOIS: 800 / 424-8802 or 202 / 426
DISTRIBUTION. PART - 1 GENERATOR PART - 2 I	EPA PART - 3 SITE	PART - 4 HAULER PART - 5 IEPA	PART 6 - GENERATO	)R
		<del></del>	0015100	

#### STATE OF ILLINOIS

**ENVIRONMENTAL PROTECTION AGENCY** DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

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**\***---Authorization Number SPECIAL WASTE HAULING MANIFEST MILES LABORATORIES 195 W. BIRCH ST. 8159378270 (Company Name) KANKAKEE IL 60901 ILD04895595 Çilys: State FPA Number WASTE HAULER(S) KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number . Hauler Name Hauler Address EPA Number Hauler Name Hauler Address EPA Number Phone Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. (Facility Name) GRIFFITH IN <u>99244370 INDO1636026</u>5 Alternate (Facility Name) Address Site Number State EPA Number Zio Phone Number TO BE COMPLETED BY WASTE GENERATOR ACETONE & CONTAMINATES LIQUÍD WASTE NAME: WASTE PHASE: (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZARD CLASS: UNI0<u>90</u> U 0 0 2 WASTE ACETONE FLAMMABLE LIQUID UN or NA Number QUANTITY OF WASTE DELIVERED: 00500 WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. METHOD OF SHIPMENT (Circle One) (DRUMS, TANK TRUCK OPEN TRUCK OTHER (Specify) Number THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION, AND I.S.P.A. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND LACKNOWLEDGE THE DESTINATION AS INDICATED: (Authorized Signature) (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE

DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. I HEREBY CERTIFY THAT THE ABOVE

PART - 3 SITE

COMMENTS OR SPECIAL INSTRUCTIONS

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

IN ILLINOIS, 217 /-782-3637 DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

TO BE COMPLETED BY

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY

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WASIE GENERATOR	2200 CHURCH	ON OF LAND PO HILL ROAD, SPR (217) 782 IAL WASTE HAL	ingfield, il 2-6760	LINOIS 62706	Authorization Number
Miles Laboratories	195 W. Birc		8159	3 7 8 2 7 0	0910550008
(Company Name) <b>Kankakee</b>	Address	60901		one Number	I L D O 4 8 9 5 5 9 5 9
City	State	Zip		· <del>-</del>	EPA Number
		WASTE HA	ULER(S)		*
Kankakee Industrial Disposa	1 1360 E. Lo	cust		· cw	0066 011
- Hauler Name	Hauler Address			5.W.I	H. Registration Number 25 31
	7	8-1	Phone Num	2931	EPA Number
			rione nun		H. Registration Number
Hauler Name	Hauler Address				32
			Phone Nur	nber	EPA Number
	Contract Con	N — DISPOSAL STO	RAGE OR TREA		n also Tiell at heritaries en en ein d
American Chemical Service	· · · · · · · · · · · · · · · · · · ·		R.R.		9 1 8 0 8 9 0 2 3 39 Site Number 46
(Facility Name)  Griffith	IN	dress 463	19 2 1	992443	70 IND01636026
City	State	Zi		Phone Number	EPA Number
Alternate (Facility Name)	. Ad	dress	•		39 Site Number 46
City	State	Zır	<del></del>	Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR					Y 4 4 - 4
WASTE NAME:	Acetone & Cor		<del></del> · ·	WASTE PHASE	Illiquid Gaseous Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THI SHIPPING DESCRIPTION:	IS MANIFEST IS OF THE DOT HAZARD CLASS:	FHAZARD CLASSIFIC	CATION INDICAT	ED IMMEDIATELY BELOW.	
			U	1 1 0 9 0	<u> </u>
Waste Acetone	Flammable I	iquid ,	. UN or I	NA Number	EPA HW Number
WEIGHT FOR 40 680 TONS (circle one)	WEIGHT FOR I.E.P.A. CONVERTED TO CU. Y		ANTITY OF WAS	STE DELIVERED: $\frac{O}{47}$	3000 (1 GALLONS Circle Qne)
METHOD OF SHIPMENT (Circle One) (DR	UMS)	NK TRUCK	PEN TRUCK	OTHER (Specify)	·
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE		DESCRIBED PACK	AGED MARKED	AND LARFLED AND IS IN	PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	OF THE ILLINOIS DEPARTM	IENT OF TRANSPORT	ATION AND I.E.	ر بر سرار بر در	2/1/21
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTE	N INFORMATION	Junis	(Authorized Sig	nature)	DATE:
WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS INDI		TE AND QUANTITY I	HAS BEEN ACCE	PTED IN PROPER CONDITION	ON FOR TRANSPORT AND I ACKNOWLEDGE
+ 0 s Da					219184
(1) (Authorized Signature)	in .				DATE:
(2)					DATE:
(Authorized Signature)					
DISPOSAL, STORAGE, OR TREATMENT FACILITY*				HAZARDOUS WA	ASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WAS	TE AND INDICATED QUANTI	TY HAS BEEN ACCEP	PTED AT THE SI	TE SPECIFIED ABOVE:	
(Authorized Signature)			-		DATE: 4 2/28/8
(Municiples Signature)					
COMMENTS OR SPECIAL INSTRUCTIONS	<del></del>		<del></del>		
<del></del>			<del></del>		
IN ILLINOIS 217 / 782-3637	*24 HOUF	EMERGENCY AND S	SPILL ASSISTAN	ICE NUMBERS"	OUTSIDE ILLINOIS: 800 / 424-8802 ai 202 / 426-267
DISTRIBUTION: PART - 1 GENERATOR PART - 2	IEPA PART - 3 SITE	PART - 4 HAU	LER PA	RT - 5 IEPA PART 6	- GENERATOR
REV # 4	·				

#### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

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T	_	_	_	_	_	7

•		(217) 7	PRINGFIELD, ILLINOIS 62706 82-6760 AULING MANIFEST	Authorization Number
Miles Laboratories	195 W. Birc		8159378270	0910550008
(Company Name) <b>Kankakee</b>	Address	60901	Phone Number	14 Generator Number 24  I L D O 4 8 9 5 5 9 5 9
City	State			EPA Number
	State	Zip	HAULER(S)	:
Kankakee Industrial Disposa	1 1360 R. Lo	٠	4.	0066 011
Hauler Name	Hauter Address		S.W.H	Registration Number 25 3
naue Name	Habiel Address	8	159332931	
		<del></del> -	Phone Number	EPA Number
			S.W.H	Registration Number
Hauler Name	Hauler Address			
			Phone Number	EPA Number
Principal and a library to the last			TORAGE OR TREATMENT SITE	
merican Chemical Service	Colfax Ave.		R.R.	91808902
(Facility Name)  Griffith		ress		39 Site Number
City	State		319 2 1 9 9 2 4 4 3	7 0 I N D O 1 6 3 6 0 2 (
	Julic		Zip Findle Author	
Alternate (Facility Name)	Add	ress		39 , Site Number 4
	•	•		
City	State		Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR				
. WASTE MARKE	Acetone & Con	<del></del>	WASTE FRASE.	Liquid (Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS SHIPPING DESCRIPTION:	MANIFEST IS OF THE DOT HAZARD CLASS:	HAZARU CLASSI	FICATION INDICATED IMMEDIATELY BELOW:	,
5 Time 5255 1154.	10001000		UN 1 0 9 0	υ O O 2
Waste Acetone	Flammable L		UN or NA Number	EPA HW Number
WEIGHT FOR MAN BEST	WEIGHT FOR I.E.P.A. U	ISF MUST BE	OUANTITY OF WASTE DELIVERED: $\frac{\acute{O}}{4}$	5000 GALLONS (Circle One)
D.O.T. USE TONS (circle one)	CONVERTED TO CU. YE	S. OR GAL.	QUANTITY OF WASTE DELIVERED:	2 CU YDS. 1
METHOD OF SHIPMENT (Circle One) (DRU	MS ) (14)	NK TRUCK	OPEN TRUCK OTHER (Specify)	
, , , ,	Number		:	
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS	RE PROPERLY CLASSIFIED.	DESCRIBED, PA	CKAGED, MARKED, AND LABELED AND IS IN I	PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	{	Price	oral Darber	DATE: 2/15/84
I REREST AGREE TO AND CENTIFY THE ABOVE WATTEN	INFURMATION	7	(Authorized Signature)	DATE.
WASTE HAULER	IE ADOVE DECOMPED WAS	C AND DUANTIT	WHAT DEEN ACCEPTED IN PROPER COMPITION	N FOR TRANSPORT AND LACKNOWN FOR
THE DESTINATION AS INDIC		E AND UDANTIT	Y HAS BEEN ACCEPTED IN PROPER CONDITION	N LOW IMMUSEOUS WHO I WOUNDANCEDOS
NA VON	11111		, in the second second	22114 81
(Authorized Signature)	The RACKER )		i i i i i i i i i i i i i i i i i i i	DATE: 0 2 1 5 8 4
2)				DATE:/
(Authorized Signature)				
DISPOSAL, STORAGE, OR TREATMENT FACILITY*			DATABOOUS WAS	ETE SUBJECT TO SEE VES NO. X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WAST	E AND INDICATED DISANTIT	Y HAS REEN AC		STE SUBJECT TO FEE YES NO X:
	C O MELONICO GOANIII		and the time of contract roots.	NYT: 2 / 1/2/2
1771 (Alphoused Sightaure)				DATE: # 2 + + + 3 4
	<del></del>		<u></u>	
COMMENTS OR SPECIAL INSTRUCTIONS:	<del></del>		<del></del>	
· · · · · · · · · · · · · · · · · · ·				
	*24 0000	EMEBÜENLA VII	D SPILL ASSISTANCE NUMBERS*	DUTCIDE II A INDIC. DOD 4 404 0000 000 4 000
N ILLINOIS: 217 / 782-3637 DISTRIBUTION PART - 1 GENERATOR PART - 2 IE		PART - 4 H		OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-26 GENERATOR

SITE COPY-PART 3

REV. # 4

70 #7 Still T-63 6KM 2.14.84

TO BE COMPLETED BY WASTE GENERATOR

### THE CONTROL OF THE PARTY OF THE STATE OF ILLINOIS

**ENVIRONMENTAL PROTECTION AGENCY** 

	2200 CHURCHILL ROAD (21)	o, SPRINGFIELD, ILLINOIS 62706 7) 782-6760 E HAULING MANIFEST	Authorization Number 8 13
Miles Laboratories	195 W. Birch St.	8159378270	0910550008 6
(Company Name)  Kankakee	Address 6090	Phone Number	I L D O 4 8 9 5 5 9 5 9
City	State Zip	<del>''</del>	EPA Number
		STE HAULER(S)	
Kankakea Industrial Disposa	1 1360 F Tomat		0066017
Hauler Name	Hauler Address	S.W	.H. Registration Number $\frac{0}{25}$ $\frac{0}{0}$ $\frac{6}{6}$ $\frac{0}{0}$ $\frac{1}{31}$
	7 · · · · · · · · · · · · · · · · · · ·	8159332931	
		Phone Number	EPA Number
Hauler Name	Hauler Address	S.W	H. Registration Number 32 38
		Phone Number	EPA Number
a de la companya de A companya de la comp	DESTINATION — DISPOS	SAL STORAGE OR TREATMENT SITE	
American Chemical Service	Colfax Ave. & C &	O R.R.	91808902
(Facility Name)	Address		39 Site Number 46
Griffith City	State 1	Zip 2 1 9 9 2 4 4 3	3 7 0 I N D 0 1 6 3 6 0 2 6
Alternate (Facility Name)	Address		39 Site Number 44
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR			
SHIPPING DESCRIPTION:  Waste Acetone	HAZARD CLASS:  Flammable Liquid		U O O 2  EPA HW Number
WEIGHT FOR 19350 LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUST B CONVERTED TO CU. YDS. OR GAL.		2 GALLONS (Circle One) 2 CU. VOS. 1
METHOD OF SHIPMENT (Circle One) (DRU	MS ) TANK TRUCK	OPEN TRUCK OTHER (Specify)	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE	ARE PROPERLY CLASSIFIED, DESCRIBED	), PACKAGED, MARKED, AND LABELED AND IS I	PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS  I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN		(Authorized Signature)	DATE: 2/17/84
WASTE HAULER  I HEREBY CERTIFY THAT TO THE DESTINATION AS INDIC		NTITY HAS BEEN ACCEPTED IN PROPER CONDITI	ION FOR TRANSPORT AND I ACKNOWLEDGE
11) Keith Kalow (Keit	1 Kodow)		DATE: 02/17/84
Authorized Signature)			» / /
(2)(Authorized Signature)	· .		DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY*	·	HAZARIMIIS W	ASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WAST	E AND INDICATED QUANTITY HAS BEEN		02/7 8
(Muthorped Signature)		<u> </u>	DATE:
COMMENTS OR SPECIAL INSTRUCTIONS.	***************************************		
	<del></del>	<u> </u>	<del> </del>
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 2 II		Y AND SPILL ASSISTANCE NUMBERS*	OUTSIDE ILLINOIS: 800 / 424-8802 of 202 / 426-26:
REV. # 4	TARY	THOUSANT FARIT	- 4

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## TO SECURE THE SECURE OF THE SE STATE OF ILLINOIS

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WASTE GENERATOR			POLLUTION CONTROL	100200
•	2200 CHUR		PRINGFIELD, ILLINOIS 62706	Authorization Number
	. SPf		82-6760 AULING MANIFEST	Authorization Number
Miles Laboratories		rch St.		
(Company Name) <b>Kankakee</b>	IL Addre	60901	Phone Number	ILDO48955959.
City	State .	Zip	<u></u>	EPA Number
	1.0	WASTE	HAULER(S)	
Kankakee Industrial Dispos	al 1360 E. I	Locust		0066 011
. Hauler Name .	Hauler Address		S.W.H.	Registration Number $\frac{0}{25}$ $\frac{0}{5}$ $\frac{6}{6}$ $\frac{6}{6}$ $\frac{1}{25}$ $\frac{1}{31}$
<b>类的</b> 类是一个人。		8	159332931	
·秦天皇教、"自己"。			Phone Number	EPA Number
Hauler Name	Hauler Address		S.W.H.	Registration Number 32 38
	That is the second			
			Phone Number	EPA Number
American Chemical Service		in the first of the second	TORAGE OR TREATMENT SITE	91808902
(Facility Name)		Address	A.A.	9 1 8 0 8 9 0 2 4 Site Number 46
Griffith	IN	46	319 21992443	70 IND01636026
City	State		Zip Phone Number	EPA Number
a de la companya de l	<u> </u>		<del></del>	39 Site Number 46
Alternate (Facility Name)		Address		Site Number 4
City	State		Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR		,		
WASTE NAME:	Acetone & Co	ontaminate	S # WASTE PHASE:_	Liquid (Liquid Gaseous Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER TH SHIPPING DESCRIPTION:		DOT HAZARD CLASSI	FICATION INDICATED IMMEDIATELY BELOW:	(Enquire, Gaseous, Surie)
SHIPPING DESCRIPTION	HAZARD CLASS:		UN1090	T 0 0 2
Waste Acetone	Flammable	Liquid	UN or NA Number	EPA HW Number .
WEIGHT FOR 27340 LBS D.O.T. USE TONS (circle one	WEIGHT FOR I.E.P. CONVERTED TO CU	A. USE MUST BE	DUANTITY OF WASTE DELIVERED: $\frac{O}{47}$	GALLONS (Circle One)  52  GALLONS (Circle One)  1  53
METHOD OF SHIPMENT (Circle One) (DI	RUMS)	TANK TRUCK	OPEN TRUCK OTHER (Specify)	
:	Number		. A	P. 1
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTI IN ACCORDANCE WITH THE APPLICABLE REGULATION	EARE PROPERLY CLASSIFIES OF THE ILLINOIS DEPAR	IED, DESCRIBED, PAI RTMENT OF TRANSPO	CKÄGED, MARKED. AND LABELED AND IS IN P RTATION AND LE P.A.	ROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT		( Jem)	My Dalle	DATE: 3/13/84
The rest was a second of the rest of the r	ETE INT CAME TON	11	(Authorized Signature)	
		VASTE AND QUANTIT	Y HAS BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INC	JICATED:	Ĵ.		
atid one 60	aus	· 表示 莲		DATE 3/13/84
(Authorized Signature)				54 59
(2)		•	•	DATE:
(Authorized Signature)			<i>.</i>	<u> </u>
DISPOSAL, STORAGE, OR TREATMENT FACILITY	n		HAZARDOUS WAS	TE SUBJECT TO FEE YES NO A
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WA	SE AND INDICATED QUAN	NTITY HAS BEEN ACC	CEPTED AT THE SITE SPECIFIED ABOVE:	2.13.61
TARMY		•		DATE:
(Authorized Signature)	<del></del>			
COMMENTS OR SPECIAL INSTRUCTIONS:		<del></del>		· · · · · · · · · · · · · · · · · · ·
			A Philip Apple Table To Market	
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION PART - 1 GENERATOR PART - 2			O SPILL ASSISTANCE NUMBERS*  AULER PART - 5 IEPA PART 6 - 1	OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

70 = 7 Still T-63 6RH 3-13.84 UUE883

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**ENVIRONMENTAL PROTECTION AGENCY** DIVISION OF LAND POLLUTION CONTROL
CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

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	`	.HILL ROAD, 3FR (217) 782 CIAL WASTE HA	2-6760 ;	•		Authorization Num	ber	<del></del>
Miles Laboratories	195 W. Bir	ch St.	8 1 5 9	3 7 8 2	7 0	0910	5 5 0 0	0 8 <sub>G</sub>
(Company Name)  Kankakee	Addres	60901	Pho	one Number	14		erator Number 8 9 5 5	9 5 92
City	State	Zip	* :	•			Number	
		. WASTE HA	ULER(S)				•	
Kankakee Industrial Dispos	al 1360 E. L	ocudt					00662	1 4
Hauter Name	Hauler Address		E # 2 4	1000	S.W.H. Rec	istration Number _	25 1	——-
		81	Phone Num	2.9 3 1			EPA Number	
			Floric Ruin	oei S	CWH Re	gistration Number_	LIA HUMBE	
Hauler Name	Hauler Address						32	3
			Phone Num	ber,	- >		EPA Number	<u></u>
and the said of the said of the		ON - DISPOSAL STO		MENT SITE		0.51 T.@#1		
merican Chemical Service (Facility Name)	Colfax Ave	. & C & O	R.R.				1 8 0 8 Site Number	902
Griffith	IN	463	19 2 1	9924	437	OIND	01636	502
City	State		ip	Phone Num	ber		EPA Number	· · · · ·
	_		<del></del>				- Ca. 41	
Alternate (Facility Name)		ddress	• • • •			•	Site Number	, ,
City	State	Zı	<u> </u>	Phone Num	ber		EPA Number	
TO BE COMPLETED BY WASTE GENERATOR		• •	٠			7 -	lquid	
WASTE NAME:	{Acetone & Co	<del></del>	;        ;	WAS1	E PHASE:		Gaseous, Solid)	
THE SPECIAL WASTE BEING TRANSPORTED UNDER T SHIPPING DESCRIPTION:	HIS MANIFEST IS OF THE DO HAZARD CLASS:	IT HAZARD CLASSIFI	CATION INDICATE	D IMMEDIATELY	RELOW:	1-1		• :
				109	)	υ 0		
Waste Acctone	Flammable	Liquid	UN or N	A Number		EPA HW Nun	iper	
VEIGHT FOR 33860 (BS)	WEIGHT FOR I.E.P.A CONVERTED TO CU.	. USE MUST BE YDS. OR GAL QU	IANTITY OF WAS	TE DELIVERE <b>D</b> :_	004	000	1 GALLONS 2 CD. YBS.	Circle (me)
METHOD OF SHIPMENT (Circle One) ([	DRUMS	ANK TRUCK	DPEN TRUCK	OTHER (Spec	ify)			 
HIS IS TO CERTIFY THAT THE ABOVE NAMED WAST	Number	D DESCRIBED BACK	ACED MADVED	ASID LABELED A	NO 15 IN DDOD	ED CONDITION FOR	LTRANSPORTATION	1
N ACCORDANCE WITH THE APPLICABLE REGULATION	NS OF THE ILLINOIS DEPART	MENT OF TRANSPORT	TATION AND I.E.T	<b>7</b> .		ER CONDITION FOR	11/1/2	./
HEREBY AGREE TO AND CERTIFY THE ABOVE WRIT	TEN INFORMATION	JENAS	(Authorized Sign	12 Miles	<u>z                                     </u>	DATE:	4/6/34	<u> </u>
WASTE HAULER		- /	(Admonted Sign				<del> </del>	
I HEREBY CERTIFY THAT THE DESTINATION AS IN	FTHE ABOVE-DESCRIBED WA IDICATED:	STE AND QUANTITY !	HAS BEEN ACCE	PTED IN PROPER -	CONDITION FO	R TRANSPORT AND	I ACKNOWLEDGE	•
$\nu$ .0.			The second		-		111.6	1 21
(Authorized Signature)	<del></del>				, i	DATE:	<del>4</del>	1 -0.7
2)				· -	· •	DATE:	/	·
(Authorized Signature)		······································	, :-	<u> </u>				
DISPOSAL, STORAGE, OR TREATMENT FACILITY	1		-	HAZAR	DOUS WASTE S	SUBJECT TO FEE	YES	NO
HEREBY CERTIFY THAT THE ABOVE DESCRIBED W.	ASTE AND INDICATED QUANT	ITY HAS BEEN ACCE	PTED AT THE SIT	E SPECIFIED AB	OVE:		4,6	(, 8
(Authorized Signature)		-Charles				DATE:	<u> 1</u>	<i>y</i>
							<del></del>	
COMMENTS OR SPECIAL INSTRUCTIONS:								<del></del>
							<u> </u>	
N ILLINDIS, 217 / 782-3637	*24 HOU	R EMERGENCY AND	SPILL ASSISTANI	CE NUMBERS*	Ol	ITSIDE ILLINOIS: 8	00 / 424-8802 or 3	202 / 426-26
DISTRIBUTION PART - 1 GENERATOR PART -	2 IEPA PART - 3 SITE	PART - 4 HAU	ILER PAR	T - 5 IEPA	PART 6 - GEN			

REV. # 4

# R 537-410 IPC 62 8781

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL

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Miles Laboratories  195 W. Birch St.  Rankakee  II. hadees 60001  Fig. Sum 1/2  Markakee  II. book 8.5 5 9 5 9 5 9 5 9 5 9 5 9 5 9 5 9 5 9 5	WASTE GENERATOR			RINGFIELD, ILLINOIS 62: 2-6760		zation Number
Company named IL Address 60901 Proce Number ILD 9 4 8 9 5 5 9 5 9 9 1 80 8 9 5 9 5 9 9 1 80 8 9 5 9 9 9 1 80 8 9 1 1 1 D 0 4 8 9 5 5 9 5 9 9 1 80 8 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•	SF				8 13
Kankakee Industrial Disposal 1360 E. Locust  Nauer Notes Process  Nauer Notes National Nation	Miles Laboratories	195 W. Bi	rch St.	8 1 5 9 3 7 8	270 0	910550008
WASTE MAULENS)  WASTE MAULENS TO BE CONTINUED TO A MAGNESS  N. M. Registration Number  Nature Name  Nature Name  Nature Address  Nature Name  Nature Name  Nature Address  N. M. Registration Number  S. W. M. Registration Number  S. W. M. Registration Number  Nature Name  Nature Name  Nature (FA Number  Nature (FA Number)  Name (FA Num	•			Phone Number		
Name	City	State	Zip		<del></del>	EPA Number
Name Name    Name   Nam	The state of the s		WASTE H	AULER(S)		•
Hauter Name    Name   N	Kankakee Industrial Disposal	1360 E.	Locust	"多"等45	S W H Registration	0066011
HAWE Name  Name Address  SW H. Registration Number  FA humber  DESTINATION — DESTORAL STORAGE OR, TREATMENT STE  American Chemical Service  Colfax Ave, & C 6 0 R.R.  Featily humbs  Failure Address  SW B. Registration Number  FA humber  Address  Griffith  IN  46319 2 1 9 9 2 4 4 3 7 0 I N D O 1 6 3 6 0 2 6  City  State  Address  Address  For Number  Address  For Number  Address  For Number  FA humber  FA hum	Hauler Name	Hauler Address				25 💌 31
HALDER KINNE  HALDER AGDRESS  FOR JUNE 100 STIMATION — DISPOSAL STORAGE OR TREATMENT SITE  AMERICAN Chemical Service  Colfax Ave. & C 6 O R.R.  DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE  AMERICAN Chemical Service  Fix humber  Address  Colfax Ave. & C 6 O R.R.  9 18 0 8 9 0 2 7  Set Rumber  Address  Colf Suite  Address  MASTE CAMPA Number  Address  MASTE CAMPA Number  Address  MASTE CAMPA Number  Address  MASTE CAMPA Number  TO BE COMMETTED BY  MASTE CAMPA Number  MASTE CAMPA Number  MASTE CAMPA Number  MASTE CAMPA Number  METHOD OF SHIPMENT (CIPC only)  METHOD				Phone Number	<u></u> -	
Reservance Name    Prof. Number   Prof. Number   Prof. Number   Prof. Number   American Chemical Service   Colfax Ave. & C & O R.R.   9 1 8 0 8 9 0 2 2				<b>.</b>	S.W.H. Registratio	n Number
DISTINATION — DISPOSAL STORAGE OR TREATMENT SITE    Same   Carlier Name   Address   9   8   8   9   9   2	Hauler Name	Hauler Address				
AMERICAN Chemical Service  (Family Name)  AGGESS  AND 46319 219924437 0 IN D 0 16 3 6 0 2 6  Cry  Suite  Log  Phone Number  Alternate (Facility Name)  Address  ACCOMMETER BY  WASTE CRIMATOR  ANSTE CRIMATOR  THE SPECIAL WASTE BEING TRANSPORTED BUNGER THIS MAINTEST IS OF THE DOT HAZARD CLASS: FLATION INDICATED MUNEDATE THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED WASTE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED TOOL - YES, OR FOR THE ABOVE - MARKED - MARK			·	Phone Number		EPA Number
Address   The Second Follows   Address   The Address   The Author			and the second of the second			经第三次的 医电影
City State Zip Proce Number Processing Process Number Processing Process Number Number Number Process Number Number Number Process Number Number Number Number Number Number Number Number Process Number N		Colfax Av		R.R.		
Alternate (Facility Name)  Address  79 Site Number  Andress  79 Site Number  TO BE COMPLETED BY  WASTE ENMANDAY  WASTE NAME:  ACCEONE & CONTEMBRIADES  WASTE FINANCE  WASTE FINANCE  WASTE PINASE  Liquid  Gesevas, Soid)  THE SPECIAL WASTE BRING TRANSPORTED UNDER HIMS MAINTEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.  SHIPPING DESCRIPTION:  WASTE NAME:  WASTE NAME:  ACCEONE & CONTEMBRIAD INDICATED IMMEDIATELY BELOW.  MAZARO CLASS:  WASTE PINASE  Liquid  Gesevas, Soid)  THE SPECIAL WASTE BRING TRANSPORTED UNDER HIMS MAINTEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.  WEIGHT FOR I.E P.A. USE MUST BE CONVERTED TO CU. YOS OR GAL.  OUN OF NA NUmber  WEIGHT FOR I.E P.A. USE MUST BE CONVERTED TO CU. YOS OR GAL.  OUN OF NA NUmber  THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPRELY CLASSIFED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH HE APPLICABLE REGULATIONS OF THE ILLINOS EXPANSIMENT OF TRANSPORTATION AND IC. Y.  I HEREBY AGREE TO AND CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION,  MASTER MAULER  I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION,  DATE:  (Authorized Synahure)  DATE:  (Authorized Synahure)  (Authorized Synahure)  COMMENTS OR SPECIAL INSTRUCTIONS:  DATE:  (Authorized Synahure)  COMMENTS OR SPECIAL INSTRUCTIONS:	선생, 역사회 가수는 그 작은 여름을 다니면 하다.	TN		319 21992	44370	
TO BE COMPLETED BY WASTE GENERATOR WASTE FAME:  Acetone & Contaminates WASTE FAME:  MASTE FAME:  MASTE PHASE  Liquid  (Liquid, Gaseous, Solid)  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  (Liquid, Gaseous, Solid)  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:  (Liquid, Gaseous, Solid)  (Liquid, Gaseous, Solid)  (Liquid, Gaseous, Solid)  WEIGHT FOR ACCEPTION:  HAZARD CLASS:  UN 1 0 9 0  UN 0 0 2  EPA HW Number  WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS, OR GAL. OLANITITY OF WASTE DELIVERED.  ACCORDANCE WITH THAT THE ABOVE NAMED WASTE ARP PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LIBELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPRICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.  WASTE HAULER  I HERBEY CERTIFY THAT THE ABOVE OBSCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION,  MASTE HAULER  I HERBEY CERTIFY THAT THE ABOVE OBSCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION,  CAUTO OF THE CONTROL OF THE VIEW OF THE STEE SPECIFIED ABOVE:  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  (Authorized Signature)  DATE:  OATE:						
TO BE COMPLETED BY WASTE RARME:  WASTE MAME:  WASTE MAME:	Alternate (Facility Name)		Address			39 Site Number 46
WASTE CENERATOR  WASTE NAME:  Acetone & Conteminates  WASTE PHASE:  (Liquid, Gaseous, Solid)  (Liquid, Gaseous, Solid)  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASS.  WASTE NAME:  MAZARD CLASS:  WASTE PHASE:  (Liquid, Gaseous, Solid)  WASTE PHASE:  UN 1 0 9 0  EPA HW Number  WEIGHT FOR 1.E.P.A. USE MUST BE CONVERTED TO CU. YOS, OR GAL.  OUANTITY OF WASTE DELIVERED.  OUT OF MANY THUCK OTHER (Specify)  MUDDER THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPRELY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPRE CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND ITP A  HEREBY AGREE TO AND CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPRER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE  THE DESTINATION AS INDICATED.  WASTE HAULER  LIGHT FOR I A CONTROL OF THE PROPRER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE  THE DESTINATION AS INDICATED.  AUTHOR OF THE PROPRER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE  THE REBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPRER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE  THE REBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND DUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:  OATE  (Authorized Signature)  DATE  (AUTHORIZED SIGNATURE)  (AUTH	City	State		ip . Phone N	umber	EPA Number
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IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 of 202 / 426-2675	CUMMENTS OR SPECIAL INSTRUCTIONS:		<del></del>			
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REV # 4

STATE OF ILLINOIS ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

1.532-0610

EPC 62 8/81

WASTE MANIFEST   1 L.D. O 4 8 9 5 5 9 5 9   Document No.   of 1	Information in the shaded areas required by Federal law, but is re by Illinois law.
	nifest Document Number 141263
	anporter's ID Manager 0 0
7. Transporter 2 Company Name & 8. US EPA ID Number Elllinois Tra	ansporter's ID
9. Designated Facility Name and Site Address 10. US EPA ID Number Gillinois Facility's Facility's ID Number Facility's	Phone 35
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12.Containers No. Type	13. 14. Total Unit Waste
Acetone & Contaminates	Quantity W/Vol S Waste   FA   W N.
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STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD. SPRINGFIELD. ILLINOIS 62706 (217) 782-6761

IL532-0610

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	highway according to applicable international and national government regulations, and Illinois regulations.						o,		
	Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under 3002(b) of RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determine								
		eçor	omically practicable and i have selected the method of treatment, storage, or disposal curre	y of was ntly ava	ste gene ilable to	rated to the degr me which minim	ee I have determined to be izes the present and future		
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	15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby declare that the proper shipping name and are classified, packed, marked,	e contents of this	consignment are	fully and ac	curately	described abo	ove by		
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MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS
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## SOUTHEASTERN WASTE TREATMENT, INC.

P.O. BOX 1697 • DALTON, GEORGIA 30720 • 404-278-0091

Plants:

No. 1 1015 New S. Harris St. No. 2 1025 New S. Harris St.

Offices:

В

C

D

Ε

441 N. Hamilton St.

Date issued:

12

82

HAZARDOUS WASTE MANIFEST STATE OF GEORGIA

Manifest Document No.

	IDENTIFICATION	ON INFORMATION	
EPA ID Number	NAME	MAILING ADDRESS	TELEPHONE
Generator WID00808618	Miller Brewing Co.	4000 West State St. Milwaukee, WI 53201	414/931-2188
Transporter # 1 GAD000222083	Southeastern Waste Treatment, Inc.	P. O. Box 1697 Dalton, GA 30720	404/278-0091
Transporter # 2			
TSDF* IND016360265	American Chemical Services	420 South Colfax Griffith, IN 46319	219/924-4370

WASTE INFORMATION

Co	ntainers	DOT Shipping Name,	Total	Weight	EPA Hazardous	Waste
No	Туре	Class & I.D. Number	Quantity	Weight	Number	Code
50	Drums	Waste Hexane MixTURE Waste Flammable Liquid NOS	0.0.5 50 dum	20,000	D001	I
		W11993 UN 1208				-
		·			19	
		EMEDOENCY IN	IEO DATATIO	N		•

**EMERGENCY INFORMATION** 

NATIONAL RESPONSE CENTER: 1-800-424-8802

GENERATOR: (♣) 931-2188

GEORGIA ENVIRONMENTAL PROTECTION DIVISION: (404) 656-4300

DISPOSER: (219) 924-4370

7: 58

### **CERTIFICATIONS**

COMMENTS - SPECIAL HANDLING

This is to certify that the above-named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, the U.S. Environmental Protection Agency, and the Georgia Department of Natural Resources.

Miles Fostar

Authorized Representative of Generator

Miles Fostar

Signature

Signature

Date:

This is to certify acceptance of the hazardous waste shipment described above.

Southeastern Waste Treatment, Inc.

Authorized Representative or Transporter: 1

8-19-82 Date:

Authorized Representative or Transporter-2

Authorized Representative of TSDF

Signature

Signature

Date:

This is to certify acceptance of the hazardous waste shipment described above for  $\Box$  T  $\Box$  S  $\Box$ 

Walt Wagoner

Signature,

8.19.82

Date:

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES.

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

MAN	IFEST NUMBER	
Α	36476	

Please type or print clearly using ball point pen - press hard. **GENERATOR (SHIPPER) SECTION** 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Miller Brewing Company WID006095251 4. P.O. BOX OR STREET ADDRESS 4000 West State Street 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER (414)-931-2000 Milwaukee, WI 53201 11. US DOT 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 13. US FPA 14. SHIPPING 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS NUMBER (Enter number in box) WASTE CODE WEIGHT (Pounds) Planmable UN 12-10 1. Solid 3. Mixture 2 D001 5 . 1.15 M Waste Flammable Liquid, N.B.S. こてのひ Liquid INT 1003 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid This is to certify that the information contained herein is true, accurate and complete and that the 15. AUTHORIZED SIGNATURE 16. NAME (Print) SHIPPED M D Y above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transpor-11 1 1 1 2 tation and the WIs. Department of Natural Resources or the U.S. Environmental Protection Agency. Miles J. Fostar TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION Southeastern Waste Treatment GAD000222083 American Chemical Services, Inc. IND016360265 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street 420 South Colfax Avenue
35. CITY STATE ZIP CODE 22. TELEPHONE NUMBER 21. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER (404) 278-0091 (219 ) 924-4370 Dalton, GA 30720 Griffith, IN 23. COMMENTS I hereby certify that the above named materials and indicated quantity (ies) has (have) been I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and t acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. received and accepted. 38. AUTHORIZED SIGNATURE 39. NAME (Print) 40. Date Accepted 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted Thereby cartify that the above named materials and indicated quantity (les) has (have) been received and accepted. M / D / Y. I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 41. ALTERNATE HAZAROUS WASTE FACILITY NAME 42. EPA IDENTIFICATION 28, EPA IDENTIFICATION 27. 2nd. TRANSPORTER COMPANY NAME 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 47. Emergency 24 Hour Assistance Telephone Number 46. MAIL TO: (608-266-3232) In Wisconsin Department of Natural Resources Outside Wisconsin (800-424-8802) Bureau of Solid Waste Management

ON OOCK 9.2.82

GUM

Madison, Wisconsin 53707

TO 204 T. T-SCI GI'M 9114-82

FOR DNR USE ONLY

Box 8094

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Wisconsin Statutes 144 See reverse side, Copy 6, for instructions. FORM-4400-66 Please type or print clearly using ball point pen - press hard.

		•	•					
<b>GENERATOR (SHIPPE</b>	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Hiller Brewin	g Company	·	WID006095251			•		
4. P.O. BOX OR STREE	T ADDRESS							i
4000 West Sta	te Street			•				
5. CITY, STATE, ZIP CO	DE		6. TELEPHONE NUMBER	•				
Milwaukee, WI	53201		(414)-931-2000					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9,	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5-55- KARUM	275	Waste Ink		Flammable Liquid	UN 1210	1. Solid 3. Mixture 2 2. Liquid	D001	2000
2 11 11	110	Waste Alcob	ol, N.O.S.	Flammable Liquid	UN 1987	1. Solid 3. Mixture 2 2. Liquid	D001	700
0 1		:		Flammable		1 Solid 3 Mixture 2		71
-	55	Waste Tolue	ne	Liquid	UN 1294	1. Solid 3. Mixture 2 2. Liquid	D001	400
This is to certify that the Inf			and complete and that the 1 ked and labeled and are in proper	5. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
			he U.S. Department of Transpor-	11.1.1	T. (1)			моч
tation and the Wis. Departm	ent of Natural Reso	urces or the U.S. Enviro	onmental Protection Agency.	Mills X.	(Colas)	Miles J. Fosta	r	11/1/62
						· · · · · · · · · · · · · · · · · · ·		
TRANSPORTER SECTI	TRANSPORTER SECTION					SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM		<del></del>	33. FPA IC	ENTIFICATION

TR	ANSPORTER SECTION			
18.	COMPANY NAME		19.EPA II	DENTIFICATION
	Southeastern Waste Tre	eatment		0222083
20.	P.O. BOX OR STREET ADDRESS			
	1015 New South Harris	Street		
21.		•	22. TELE	PHONE NUMBER
	Dalton, GA 30720	404	4 ) 278-0091	
23.			1	
			•	
	•			
1 1) 0	reby certify that the above named mate	erials and indicated quantity	vias) bas (ba	ave) been accepted
in p	roper condition for transportation and gnated as Hazardous Waste Facility.			
24.	AUTHORIZED SIGNATURE	25. NAME (Print)		26. Date Accepted
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in p	reby certify that the above named mate oper condition for transportation and gnated as Hazardous Waste Facility.	erials and indicated quantity I acknowledge that delivery	(ies) has (ha / shall be ma	ave) been accepted de to the facility
27.	2nd. TRANSPORTER COMPANY NA	AME	28. EPA II NO.	DENTIFICATION
29.	AUTHORIZED SIGNATURE	30. NAME (Print)		31. Date Accepted

HAZARDOUS WASTE FACILITY	SECTION		
32. FACILITY NAME		33. EPA NO.	IDENTIFICATION
American Chemical Serv	rices, Inc.		016360265
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax Avenu	le		
35. CITY, STATE, ZIP CODE		36. TEL	EPHONE NUMBER
Griffith, IN	(219	9 1-924-4370	
37. COMMENTS			
		•	.
			'
I hereby certify that the above named in received and accepted.	naterials and indicated quar	ntity(les) has (ha	ve) been
38. AUTHORIZED SIGNATURE	39. NAME (Print)		40. Date Accepted
Sance Munh	GEO MUP	DHY	9/2 /82
I hereby cedify that the above named m received and accepted.	naterials and indicated quan	tity(ies) has (ha	ve) been
41. ALTERNATE HAZARDONS WAS		42. EPA	IDENTIFICATION
Z .		NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
			/ 5 / .
46. MAIL TO:	47. Emergency 24 Hour	Assistance Tele	phone Number

Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53707

In Wisconsin (608-266-3232) (800-424-8802) Outside Wisconsin

FOR DNR USE ONLY

TO 104 TH T- SC. 616M 9-14.52

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

Sed reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

COMPANY NAME			<del></del>	<del></del>		
	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		<del></del>
Hiller Brewing Company P.O. BOX OR STREET ADDRESS	WID00030861 D			• •		
1000 West State Street				•		
CITY, STATE, ZIP CODE  Silwaukee, WI 53201	6. TELEPHONE NUMBER  (414). 931-2000	·				
NUMBER & TYPE OF CONTAINER 8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
0-55 w/ 1 4m 2750 Was	ito Hexane Mixture, N.B.S.	Flammable Liquid	UN 1208	1. Solid 3. Mixture 27.	D001	20.000
			•	1. Solid 3. Mixture 2. Liquid		
				1. Solid 3. Mixture 2. Liquid		
is is to certify that the information contained herein i ove named materials are properly classified, described	, packaged, marked and labeled and are in proper	15. AUTHORIZED S	IGNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
ndition for transportation according to the applicable ion and the Wis. Department of Natural Resources or		Miles	tota	Miles J. Fosta	r	6/14/82
RANSPORTER SECTION		HAZARDOUS W	ASTE FACILITY	SECTION		
COMPANY NAME	19. EPA IDENTIFICATION	32. FACILITY NAM		DECTION	33. EPA 10	DENTIFICATION
outheastern Waste Treatment	NO. GAD000222083	American Ch	NO.	D016360265		
P.O. BOX OR STREET ADDRESS		34. P.O. BOX OR S	cmical Service TREET ADDRESS		1 24124	**************************************
.015 New South Harris Street	·	420 South C	blfax Avenue			
. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		36. TELEP	HONE NUMBER
Dalton, GA 30720	(404 ) - 278-0091	Griffith, I	n		( 219	924-4370
COMMENTS						•
	·					
			•			
ereby certify that the above named materials and indi proper condition for transportation and I acknowledg	cated quantity(ies) has (have) been accepted e that delivery shall be made to the facility	I received and accenter	а 🔿	terials and indicated quantil		
		38. AUTHORIZED		39. NAME (Print)  GEORGE M( erials and indicated quantit		O. Date Accepted
ignated as Hazardous Waste Facility.  AUTHORIZED SIGNATURE 25. NAME	1 47 / Ya /// 1	I hereby cartly that	the approve named mat	erials and indicated quantit	y(ies) has/(have	) been
AUTHORIZED SIGNATURE 25. NAME	418 / ING 17/16C	43	A T Koledovia vice			
AUTHORIZED SIGNATURE 25. NAME	e that delivery shall be made to the facility	41. ALTERNATE H	IAZĀROOUS WASTE	E FACILITY NAME	NO.	ENTIFICATION
AUTHORIZED SIGNATURE 25. NAME	cated quantity (ies) has (have) been accepted e that delivery shall be made to the facility  28. EPA IDENTIFICATION NO.	41. ALTERNATE H	iazār <del>b</del> ous waste	44. NAME (Print)	NO.	5. Date Accepted M / D / Y

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MANIFEST NUMBER

			HAZARDOUS	WASTE N	MANIFES
See reverse side, Copy 6, for instructions.			Wisconsin Statu	tes 144	
Please type or print clearly using ball point pen -	– press hard	- 1 J	FORM 4400-66	•	
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GENERATOR (SHIPPE	R) SECTION	F		<del></del>		······································	· · · · · · · · · · · · · · · · · · ·		₩7^/
1. COMPANY NAME		<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTION	NS , I	<del>1 • • •</del>		}
Miller Brewin 4. P.O. BOX OR STREE	g Compan	у	WID000808618						(
		,							13
4000 West Sta	te Stree	<u>t</u>	6. TELEPHONE NUMBER	-	·				
Milwaukee, WI			414 931-2000		•				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	5 9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPF WEIGHT (P	
74-55 mil	7090	Waste Hexa	ne Mixture, N.O.	S. Flammable Liquid	UN. 1208	1. Solid 3. Mixture 2. Liquid	D001	5,74	:0
		:				1. Solid 3. Mixture 2. Liquid	j .	s., /	
						1. Solid 3. Mixtule 2. Liquid			
above named materials are p condition for transportation	properly classified according to the	l, described, packaged, ma applicable regulations of	e and complete and that the irked and labeled and are in proper the U.S. Department of Transpor- connental Protection Agency.	15. AUTHORIZED S	FOULD	Miles J. Fo	star	17. DATE SHIPPI M D	EO, KZ
		£.	K 4 8 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$ 1. A.	/1	!	<del> </del>		
TRANSPORTER SECTI	ON	\$	.## <b>.</b> #*	HAZARDOUS W.	ASTE FACILITY	SECTION			
18. COMPANY NAME			19.EPA IDENTIFICATION	32 FACILITY NA	ME	<u> </u>	33. EPA ID	ENTIFICA	TION
ABC Services	Inc.		WID076159839	American C	hemical Se	rvices. Inc.		360265	
20. P.O. BOX OR STREET				34. P.O. BOX OR S	•-		•		İ
5700 49th Str 21. CITY, STATE, ZIP CO	eet	<del></del>	22. TELEPHONE NUMBER	420 S. Col	<u>fax Avenue</u>		136 TELEP	HONE NUM	IRER .
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Kenosha, Wisc 23. comments	onsin 53	142	414,657-6222	Graffith, 37. COMMENTS	Indiana	<del>_</del>		924-4	3/0
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24. AUTAORIZED SIGNA	ATURÉ :	25. DIAME (Print)	est Oate Attended	Thereby certify that	the above named ma	HAVIN LIGHT AND ALL THE REPORT OF THE PARTY	(ha) has (have	Deep 8	ž
ne ebycertily that the abo in proper condition for trans designated as Hazardous Was	ove named materi sportation and fa ste Facility.	als and indicated quantity acknowledge that delivery	(ies) has (have) been accepted shall be made to the facility			E FACILITY NAME		ENTIFICAT	ION
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29. AUTHORIZED SIGNA	ATURE	30. NAME (Print)	31. Date Accepted M / D / Y		Natural Resources		sistance Telepho 608-266-3232) 800-424-8802)		Į.
		T- 210	D T-50	Bureau of Solid Box 8094 Madison, Wiscon	Waste Management	Outside Wisconsin (	800-424-8802)		

HAZARDOUS WASTE FACILITY

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

## HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION	<del></del>	<del>- 4</del>	·			. 77	<del></del>
1. COMPANY NAME	.,,		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS I	<u>• ₹₹₹</u>	
Miller Brewin	g Company	<del> </del>	WID006005251	·				),
4000 West Sta								
5. CITY, STATE, ZIP CO		<del></del>	6. TELEPHONE NUMBER	,				
Milwaukee, WI	**	· -	(414)-931-2000	<del></del>	· · · · · · · · · · · · · · · · · · ·			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds)
1-354	55	WASTE INK		Flammable Liquid	UN1210	1. Solid 3. Mixture 5	D001	400
1-55	55	WASTE ALC	OHOL, N.O.S.	Flammable Liquid	UN1987	1. Solid 3. Mixture 2. Liquid	D001	400
1-55 /10	55	WASTE TOL	JENE	Flammable	1	1. Solid 3. Mixture 2	D001	400
This is to certify that the inf			e and complete and that the rked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	DUUI	17. DATE SHIPPED
condition for transportation	according to the app	olicable regulations of	the U.S. Department of Transpor- onmental Protection Agency.	Add to	TI TO	Miles J. Fo	star	M D Y
tation and the Wis, Departme	ent or Natural Resol	urces of the U.S. Envir	onmental Protection Agency.	A CONTRACTOR	-08W	,		2 166 45
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18. COMPANY NAME	ON	<del></del>	19. EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. EPA 1	DENTIFICATION
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20. P.O. BOX OR STREET	T ADDRESS		MID018124834	34. P.O. BOX OR S	TREET ADDRESS	rvices, Inc.	TIMDOL	6360265
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5700 49th Str	DE		22. TELEPHONE NUMBER	420 S. Col	ZIP CODE		36. TELE	PHONE NUMBER
Kanosha Wigo	ongin 5314	2	(414) 657-6222				219 924-4370	
Kenosha, Wisc	DIIDTII JATA	<u></u>	414 057-0222	37. COMMENTS				
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I hereby certify that the abo	ve named materials a	and indicated quantity	(ies) has (have) been accepted	I received and accepted	dr	terials and indicated quantil		
designated as Hazardous Was	te Facility.		1 1 10	38 AUTHORIZED	SIGNATURE	39. NAME (Print)	1	40. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	My D / Y	Clan lite	all	Ahrin White	KER	3/3/2
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designated as Hazardous Was	te Facility.	ind Indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print),	3,2	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted		<del></del>	47 6		
			M', D , Y	Bureau of Solid	latural Resources Waste Management		sistance Telept 608-266-3232) 800-424-8802)	· #
		70204	TE 7-50	Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

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Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS 4. P.O. BOX OR STREET ADDRESS WID000808618 4000 West State Street 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER 414 ) 931-2000 53201 Milwaukee. WI 11. US DOT DENTIFICATION NUMBER 7. NUMBER & TYPE OF 10. US DOT 13. US EPA 14. SHIPPING 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS WASTE CODE WEIGHT (Pounds) (Enter number in box) Flammable 1. Solid 3. Mixture b Waste Hexane Mixture, N.O.S UN1208 D001 2. Liquid Liquid 1. Solid 3. Mixture 2. Liquid 1, Solid 3, Mixture 2. Liquid This is to certify that the Information contained herein is true, accurate and complete and that the 15. AUTHORIZED SIGNATURE 16. NAME (Print) SHIPPED above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transpor-Miles J. Fostar tation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION IND016750265 CAD000222083 Southeastern Waste Treatment, Inc. American Chemiusi Services, Inc. 20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street 35. CITY STATE LES AVO. 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER Griffith, Indiana <sup>(</sup>219 <sup>)</sup> 924–4370 30720 (404 ) 278-0091 Dalton, Georgia 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity(les) has (have) been I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted received and accepted. in proper condition for transportation and I acknowledge that delivery shall be made to the facility AUTHORIZED SIGNATURE 39. NAME (Print 40. Date Accepted designated as Hazardous Waste Facility. 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted I hereby certify that the above named materials and indicated quantity (les) has have been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION designated as Hazardous Waste Facility. 27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number Department of Natural Resources In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802) Bureau of Solid Waste Management Box 8094 FOR DNR USE ONLY On docle S. S. SZ GRY Madison, Wisconsin 53707

TO 210 FT 50 GRM 630 SZ

HAZARDOUS WASTE FACILITY

See reverse side, Copy 6, for instructions.

15. AUTHORIZED SIGNATURE

MAINTEST MUMBER

17. DATE SHIPPED

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Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Miller Brewing Company
4. P.O. BOX OR STREET ADDRESS WID006095251 4000 Best State Street 5. CITY, STATE, ZIP CODE . 6. TELEPHONE NUMBER 414 931-2000 53201 Milwaukee. WI 11. US DOT DENTIFICATION 7. NUMBER & TYPE OF 14. SHIPPING 10. US DOT 12. PHYSICAL STATE 13. US EPA 8. GALLONS 9. WASTE NAME HAZARD CLASS WASTE CODE WEIGHT (Pounds) CONTAINER (Enter number in box) NUMBER Flammable 1. Solid 3. Mixture v(00)D001 Waste Ink 2. Liquid Liquid UN1210 Fladmable 1. Solid 3. Mixture D001 100 O Waste Alcohol, N.O.S. Liquid 2. Liquid UN1987 Flammable 1. Solid 3. Mixture 5 D001 Liquid Waste Toluene UN1294 2. Liquid

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18.	COMPANY NAME			ENTIFICATION
	Southeastern Waste Tre	satment Inc.	GADOO	0222083
20.	P.O. BOX OR STREET ADDRESS	M CHANGE ALLO	<del></del>	
	1015 New South Harris	Q+mas+		
21.	CITY, STATE, ZIP CODE	SLIERL	22. TELE	HONE NUMBER
	Dalton, Georgia 30	720	(404	) - 278-0091
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	Southeastern)	10050	NO.	
29.	AUTHORIZED SIGNATURE	30. NAME (Print)		31. Date Accepted
		Land Land Comment		M / D / Y

This is to certify that the information contained herein is true, accurate and complete and that the

tation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

above named materials are properly classified, described, packaged, marked and labeled and are in proper

condition for transportation according to the applicable regulations of the U.S. Department of Transpor-

HAZARDOUS WASTE FACILIT	Y SECTION	
32. FACILITY NAME		33. EPA IDENTIFICATION
American Chemical Ser	vices, Inc.	ND016360265
34. P.O. BOX OR STREET ADDRES	S	
420 S. Colfax Avenue		
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
Griffith, Indiana		(219) 924-437
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43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted
		M / D / Y
	_1	
46. MAIL TO:	47. Emergency 24 Hour F	Assistance Telephone Number

16. NAME (Print)

Miles J. Fostar

Bureau of Solid Waste Management

Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

Madison, Wisconsin 53707

Box 8094

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard. HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION				<del></del>				
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
Miller Brewing	Company		WID000808618						
4. P.O. BOX OR STREE	TADDRESS								
4000 West Stat								·	
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER						
Milwaukee, WI	53201		(414)-931-2000						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
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Southeastern W	aste Trea	tment	GAD000222083	American C	hemical Se	rrices, Inc.	ายมูดา	360265	
20. P.O. BOX OR STREET	ADDRESS	<u>.</u> .		34. P.O. BOX OR ST	FREET ADDRESS				
1015 New South		Street	·	420 South		nue			
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		To Sol.	HIX T-50	Box 8094 Madison, Wiscons		FOR DNR USE ONLY			

See reverse side, Copy 6, for instructions.

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Milwaukee, Wis	consin 53	201	414 931-2188			·		
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18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM	1E		33. EPA II	DENTIFICATION
Mr. Prank. Inc			11.0069506160	American C	hemical Se	rvices	1	6360265
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201 West 155 S	treet	·		420South_C	olfax Aven	ue		
21. CITY, STATE, ZIP CO	DDE		22. TELEPHONE NUMBER	420 South Colfax Avenue 35. CITY, STATE, ZIP CODE 36. TELEPI			HONE NUMBER	
South Holland,	Illinois	60473	312 596-3377	Griffith	Indiana 46	319	219	924-4370
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		TO 2117-	50 6 RM .	→8→Box 8094 Madison, Wiscon	-	FOR DNR USE ONLY		
. ,		2.43	63	madison, wiscon				[ ]



In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

UNIFORM HAZARDOUS 1. Generator's US WASTE MANIFEST 1. Generator's US	S EPA ID No.	Manifest Document No.	2. Page 1 Information	nation in the	e shaded areas is Federal law, but I I are required by
3. Generator's Name and Mailing Address	7 4 7 7 5 0	17 .7 .07	of State  A State Manifest D	law. ocument Nur	nber
Miller Davis 1029 Portage Road Kalamaroo	A 32		INA o	1171	87
4. Generator's Phone ( ) Ralamazoo	MI =49001	TO THE STATE	B. State Generator	4,00	Consider to A
5. Transporter 1 Company Name 345-3561	6. Use EPA ID Numbe	r Less sea	C. State Transporte		
A&B Industrial Services	ב בני מ מו א	7 77 2	D. Transporter's Ph	A I D	375-9595
7. Transporter 2 Company Name	8. Use EPA IO Numbe	r 	E. State Transporter's Ph		Compared Agent
9. Designated Facility Name and Site Address	10. Use EPA ID Number	r	G. State Facility's I	<u> </u>	
American Chemical Service	112 ¥				(\$1,-001g)
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Griffith, IN 48319	M. 10 Dt 63.	6 0 26 5 12. Contain	1 219 924 - lers 13.	4370	) (1 m / m / m / m / m / m / m / m / m / m
11. US DOT Description (Including Proper Shipping Name, Hazaro	d Class, and ID Number)	No.	Total Type Quantity	Unit Wt/Vol.	Waste No.
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Additional Descriptions for Materials Listed Above	AS IS REQUIRED &	LADEDMARE	C Handling Codes for	Wastes Lister	Above Parallel
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6. GENERATOR'S CERTIFICATION: I hereby declare that the co-	ontents of this consignme	nt are fully and a	ccurately described	above by ~	
according to applicable international and national government	ent regulations.	That No 1997 is	on 60 989 FROS	port by mgr 27aみおくご	I SHORTOLIST
If I am a large quantity generator, I certify that I have a production of the determined to be economically practicable and that I have	selected the practicable	method of treat	ment, storage, or dis	posal curre	ntly available to me
which minimizes the present and future threat to human the effort to minimize my waste generation and select the best	health and the environme waste management met	ent; OR, if I am a nod that is availa	small quantity gene ble to me and that I	rator, I have an afford.	made a good faith
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17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: / /					Date
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EPA Form 8700-22 (Nev. 9-00) Previous editions are obsolete. State Form 11865 / 〇 - 깇〇ゼド

PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO ID

PAGE 5 (Ight Blue) 150 COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035

	UNIFORM HAZARDOUS			Manifest Document No.	2. Page 1	Information in t	he shaded areas is y Federal law, but nd I are required by
	WASTE MANIFEST  3. Generator's Name and Mailing Address	I.T. D. O. D. 2-1	·7·8·9·/·>	Ter an gen		State law.	
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	H MR. S. FRANK . T. INC						2)596-537
11	7. Transporter 2 Company Name	, 8. (	Use EPA ID Number		E. State Tran	sporter's ID	WESTERN COL
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	11. US DOT Description (Including Proper	Shipping Name, Hazard Class,	and ID Number)_ 🚉		'To	14. Unit of Wilder	Wyaste No.
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E N	FLAMMABLE LIQUID	OF-Fiber of plans BA-Bans	<ul><li>II—Dump truck</li><li>Y—Cylinders</li></ul>		M O Year	1013di -70	7603
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

Form designed for use on elite (12-pitch) typewrite

Form Approved. OMB No. 2050-0039. Expires 9-30-

	Generator's Name and Mailing Address HILLER PAINT EQUIPMENT, LTD. 345 S. STEWART AVE. ADDISON, IL 60101					11 77 1	<u> </u>	<u> </u>
4.	Generator's Phone (312 ) 543-8530					B. State Generator's 1 043005501	. <b>5</b>	
	Transporter 1 Company Name		A ID Number			C. State Transporter's		079
	MR. PRANK, INC.		6 9 5		لنــٰ	D. Transporter's Phor		) 596-3377
7.	Transporter 2 Company Name	8. Use El	PA ID Number		L	E. State Transporter's		
9.	Designated Envilled Name and Site Address	10 Use FI	A ID Number	• • • •	<u>·  </u>	F. Transporter's Phon G. State Facility's ID	e .	
<b>J</b> .	AMERICAN CHEMICAL SERVICES	10. 030 2.	·			91808902	!	
	COLFAX AVE. @ C & O RR GRIFFITH, IN 46319		٠			H. Facility's Phone		
	GRIFFITH, 1N 40319	INDI	163.			(312) 768	3-3400	
11	I. US DOT Description (Including Proper Shipping Name, Hazard	Class, and I	D Number)	12. Con	tainers	13. Total	14 Unit	l. Waste No.
	WASTE PLANMABLE LIQUID, N.O.S.			No.	Тур	e Quantity	Wt/Vol.	7000
٠.	FLAMMABLE LIQUID							F003
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<del>.</del>	effort to minimize my waste generation and select the best w  Printed/Typed Name		nature	ou that is ava	iiable	o me and that I can	attord.	Date
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. /	OFFICE OF SOLID	AND HAZA	RDOUS	WASTE I	MANAGEMENT
	P.O. Box 7035	v .			
/	Indianapolis, IN 46	207-7035			
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	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US	$\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$ $\cdot$	Manifest Document No.	of 6 State	nation in the shaded a guired by Federal I D. F. H and I are requ law.	aw, c
	3. Generator's Name and Mailing Addre	MIELS FO 4575 CAR	LECTRIC CO LONG 1 AVE ID IN 463	· · · · · · · · · · · · · · · · · · ·	A State Manifest Do	35039	· · · · · ·
	Generator's Phone (		6. Use EPA ID Number		C. State Transporter	's ID	
	7. Transporter 2 Company Name	CO.	8. Use EPA ID Number	163./E	D. Transporter's Pho  E. State Transporter  F. Transporter's Pho	- 1/2 U - 1/2 U	3/
	9 Designated Facility Name and Site A HMERICH-N HEAL 410 S. COLFIX A	اد <del>ا</del> الرام	The Committee of the care of		G. State Facility's ID	Ис. ( 1965) 14-1905	
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	C.	· · · · · · · · · · · · · · · · · · ·					
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	J. Additional Descriptions for Materials Listed	· · · · · · · · · · · · · · · · · · ·			Handling Codes for W		
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	15. Special Handling Instructions and Addition	nal Information		<u>.</u>	· · · · · · · · · · · · · · · · · · ·	·	
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOUD AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035

Indianapolis, IN 46207-7035

UNIFORM HAZARDOU WASTE MANIFEST	CEG	US EPA ID No.	Doc
3. Generator's Name and Mailing Add	4325	ALCHET AV	( 0) ( 2) 7)
4. Generator's Phone (2/9) 5. Transporter 1 Company Name	131.311	6. Use EPA ID Nur	0527
5. Transporter 1 Company Name  TRAND TRUCKING  7. Transporter 2 Company Name	co.	TLD COL	.6.46
Section 1999			
9 Designated Facility Name and Site VINIER (IFN IIER		VICE	mber 
ERIFFITH IN WE	319-0190	TND 0.1.6	360,
11. US DOT Description (Including Prop	per Shipping Name, Haz	ard Class, and ID Numbe	(r) 12
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J. Additional Descriptions for Materials Lis	ted Above		······································
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15. Special Handling Instructions and Add	litional Information		
16. GENERATOR'S CERTIFICATION: I h proper shipping name and are clas according to applicable internation	sified, packed, marked	l, and labeled, and are ir	nment are full ail respects
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18. Transporter 2 Acknowledgement of F Printed/Typed Name	Receipt of Materials	Signature	
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19. Discrepancy Indication Space			
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20. Facility Owner or Operator: Certifica	tion of regeipt of hazarde	ous materials covered by	thu manifest e
I WILLIAM DU.	//7	1 (1 4) (1)	9 <i>771-1</i> 817

COPY 5. TSD COPY

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

A neges

Please type or print clearly	y using ball point	pen - press hard.	, FO	RM 4400-66	9-80	:	00333	· · · · · · · · · · · · · · · · · · ·
GENERATOR (SHIPPE	R) SECTION				:			
1. COMPANY NAME		a d	2. EPA IDENTIFICATION N	O. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milprint Inc.			WID-000068155	I				
4. P.O. BOX OR STREET	T ADDRESS			7				
P.O. Box 454		- A	and the state of t					
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER	_				
Hilwaukee WI	52201		(414) 332-5800	<b>、</b>				
1	73201	<u> </u>	7 414 332-3800		11 US DOT	7	1	T
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
		: .	A CONTRACTOR OF THE CONTRACTOR	Planmable		1. Solid 3. Mixture X	1	
80-55 Gallon Drum	4400	Veste Plann	able Liquid	Liquid	UN1993	2. Liquid	D001	36,000
	2					1. Solid 3. Mixture 2. Liquid		
		N. Comment	S- 1.1.			1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf	ormation contained	herein is true, accurat	e and complete and that the	15. AUTHORIZED S	I IGNATURE	16. NAME (Print)	L <del></del>	17. DATE
above named materials are p	roperly classified, de	escribed, packaged, ma	rked and labeled and are in pro-	per /				SHIPPED M D Y
			the-U.S. Department of Transpo namental Protection Agency.	or - 1/1/1/1/1/	16.1.		(	11/4/187
Tation and the visa Bopa (in	ent of Natoral Roso	At a second control of the second control of	dimental Protection Agency.		And the second	Floyd Lyneis	· · · · · · · · · · · · · · · · · · ·	/ // // 8 5
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TRANSPORTER SECTION 18. COMPANY NAME	ON	. And the second	Do eno (Ocorregion Tier	HAZARDOUS W.	ASTE FACILITY	SECTION	132 500 16	DENTIFICATION
16. COMPANY NAME		<b>3</b>	19.EPA IDENTIFICATION NO.				NO.	
Southeastern W	aste Treatmi	ent, Inc.	GA000222083	American	Chemical Ser	vices, Inc.	INDOI	6360265
20. P.O. BOX OR STREET	ADDRESS		111	34. P.O. BOX OR S	IRLET ADDRESS			
1015 New South	Harris Stre	eet		421 South	Colfax Aven	ae		
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		36. TELEF	HONE NUMBER
Dalton, Georgi	<b>a</b> 30720	•	(404) - 278-0091	Griffith.	Indiana		(219	)- 924 <b>-</b> 4370
Dalton, Georgi 23. COMMENTS				37. COMMENTS				
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I hereby certify that the abo	ve named materials	and indicated quantility	(ies) has (have) been accepted			terlals and indicated quanti	ty(ies) has (have	e) been
in proper condition for trans	portation and Lacki	nowledge that delivery	shall be made to the facility	received and accepte		39. NAME (Print)		O. Date Accepted.
designated as Hazardous Was  24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted			TIME	Tar. 1	W/Q-/Y-
24. AUTHORIZED SIGNA	23.	Derel A Gra	MI PHI XX		the above gamed ma	terials and indicated quantit	y(ies) has (have	been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackr	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME		ENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	46. MAIL TO: Department of I	Natural Resources		608-266-3232)	one Number
				Bureau of Solid Box 8094	Waste Management	·	800-424-8802)	
		<b>^</b>	ماء - ا	BOX 8094		FOR DNR USE ONLY		1 1

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Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

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<b>GENERATOR (SHIPPER)</b>	SECTION	<del></del>		·				<del></del>
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milprint Inc.	ADDRESS		WID-000068155					
1								
P.O. Box 454 5. CITY, STATE, ZIP COD	E		6. TELEPHONE NUMBER					
Milwaukee, WI	53201		(414 )- 332-5800	•				
7 NUMBER & TYPE OF	8. GALLONS	9	. WASTĘ NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
77 87-55 Gallon Drum	4785	Waste Floram	able Liquid	flammable	UN 1993	1. Solid 3. Mixture X	D001	39,150
	,					1. Solid 3. Mixture 2. Liquid		
,						1. Solid 3. Mixture 2. Liquid		
	perly classified, de cording to the app	scribed, packaged, ma olicable regulations of	rked and labeled and are in proper the U.S. Department of Transpor-	15. AUTHORIZED SI	GNATURE	Floyd Lyneis		17. DATE SHIPPED M D Y 9 / /82
TRANSPORTER SECTION	M		<del></del>	HAZARDOUS WA	ACTE EACH ITY	SECTION		
18. COMPANY NAME		<del></del>	19.EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. EPA 10	ENTIFICATION
Southeastern Was 20. P.O. BOX OR STREET	ite Treatmen	I, Inc.	GA000222083	American (	Chemical Serv	ices, inc.	INDO	6360265
21. CITY, STATE, SPUTOL	Horris Street		22. TELEPHONE NUMBER	421 South Colfax Avenue 35. CITY, STATE, ZIP CODE 36. TELEPHONE R				HONE NUMBER
23. Contents GA 307	20		(404)-278-0091	Griffith,	IN	<del></del>	218	<sup>) -</sup> 924-4370
								,
I hereby certify that the above	named materials a	ind indicated quantity	(ies) has (have) been accepted			terlals and indicated quantit	y(ies) has (have	e) been
in proper condition for transpo designated as Hazardous Waste	rtation and Lackn	owledge that delivery	shall be made to the facility	38_AUTHORIZED	SIGNATURE	39. NAME (Print)	4	0. Date Accepted
24. AUTHORIZED SIGNATU	JRE 25.	NAME (Print)	26. Date Accepted M / D / S 2	I hereby certify that to	the above named mat	FRAN K PRIC erials and indicated quantit	y(ies) has (have	7 12 18 2 been
I hereby certify that the above in proper condition for transpo	named materials a	nd indicated quantity	(ies) has (have) been accepted	received and accepted 41. ALTERNATE H			42. EPA ID NO.	ENTIFICATION
designated as Hazardous Waste 27. 2nd. TRANSPORTER CO			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	-1	5. Date Accepted

30. NAME (Print)

46. MAIL TO:

Box 8094

Department of Natural Resources

Bureau of Solid Waste Management

31. Date Accepted

MIDIY

29. AUTHORIZED SIGNATURE

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION	····	<del></del>					
1. COMPANY NAME	.,		2. EPA IDENTIFICATION NO	D. 3. COMMENTS/SPECIAL INSTRUCTIONS				
Milorint Inc.			WID-000068155					
4. P.O. BOX OR STREE	T ADDRESS		ν,	<b>1</b>	•			
P.O. Box 454 5. CITY, STATE, ZIP CO				_	Y			
1			6. TELEPHONE NUMBER	1				
Milwaukee, WI	53201	, , , , , , , , , , , , , , , , , , ,	(414) 332-5800	1		1	ı	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
87-55 Gallon Drum	as 4785	Waste Flamm	able Liquid	Flammable Liquid	UB1993	1. Solid 3. Mixture XX	D001	39,150
· · · · · · · · · · · · · · · · · · ·						1. Solid 3. Mixture 2. Liquid		
						1. Solld 3, Mixture 2. Liquid	1	
	roperly classified, de	escribed, packaged, ma	e and complete and that the rked and labeled and are in prope the U.S. Department of Transpor		IGNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
			onmental Protection Agency.	1 State	Music.	Floyd Lyneis		111.11
TRANSPORTER SECTI	ON				ASTE FACILITY	SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION NO.	32. FACILITY NAI			NO.	DENTIFICATION
Southeastern W	aste Treatme	ent, Inc.	GA-000222083	American 34, P.O. BOX OR S	Chemical Ser	vices, Inc.	IND-16	360265
1			3	1			· i	
1015 New South	<u>Harris Stre</u> De	ec	22. TELEPHONE NUMBER	421 South	PHONE NUMBER			
Dalton, GA 30	720		(400) 278-0091	Griffth.	(219)- 924-4370			
23. COMMENTS			1	37. COMMENTS	A.I.I.			724-4370
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			, X		/	<b>\</b>		İ
				\		sterials and indicated quanti		-1
in proper condition for trans designated as Hazardous Was	portation and I ackn	ind indicated quantity lowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received and accepte 38. AUTHORIZED	d.	39. NAME (Print)		40. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	1/1/1/1/3	K i	= 2 112 - 0 1		M / D / Y
Stale of Hat	Town CH	arles C.C.	Marken MIPOLY	I hereby certify that received and accepted	he above named ma	terials and indicated quantil	y(ies) has (hav	erbeen 7 82
I hereby certify that the above in proper condition for transpondesignated as Hazardous Wast	portation and Lackn	nd indicated quantity( owledge that delivery	ies) has (have) been accepted shall be made to the facility	41. ALTERNATE	IAZAR OUS WAST	E FACILITY NAME	42. EPA IC NO.	DENTIFICATION
27. 2nd. TRANSPORTER (	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted		Natural Resources Waste Management		ssistance Teleph 608-266-3232) 800-424-8802)	
				Box 8094		FOR DNR USE ONLY		
		()	lock 17.17.82	Madison, Wiscon	sin 53707			1 1

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144

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MANIFEST NUMBER

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FORM 4400-66 Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS WID-000068155 Milprint Inc. 4. P.O. BOX OR STREET ADDRESS P.O. Box 454 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER (414) 332-5800 Milwaukee, WI 53201 11. US DOT IDENTIFICATION 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS NUMBER (Enter number in box) WASTE CODE WEIGHT (Pounds) 1. Solid 3. Mixture XX Flammable UN1993 D001 39,150 87e55 Gallon Drums 4785 Waste Flammable Liquid 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid This is to certify that the information contained herein is true, accurate and complete and that the 15. AUTHORIZED SIGNATURE 16. NAME (Print) 17. DATE SHIPPED above named materials are properly classified, described, packaged, marked and labeled and are in proper M D condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency. Floyd Lyneis TRANSPORTER SECTION -HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION American Chemical Services, Inc. 34. P.O. BOX OR STREET ADDRESS Southeastern Waste Treatment, Inc.
20. P.O. BOX OR STREET ADDRESS GA-000222083 IND-16360265 1015 New South Harris Street
21. CITY, STATE, ZIP CODE 421 South Colfax Avenue
35. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER Dalton, GA 30720 Griffth IN We accept 54 Refuse 33 I hereby certify that the above named materials and indicated quantity(les) has (have) been I hereby certify that the above named materials and indicated quantity (les) has (have) been accepted received and accepted. in proper condition for transportation and I acknowledge that delivery shall be made to the facility 38. AUTHORIZED SIGNATURE 39. NAME (Print) 40. Date Accepted designated as Hazardous Waste Facility. 24: /AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted hereby certify that the above named majerials and indicated quantity(ies) has (have) been received and accepted. 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION I kereby certify that the above named materials and indicated quantity (les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted 27. 2nd, TRANSPORTER COMPANY NAME M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M / D / Department of Natural Resources In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802) Bureau of Solid Waste Management Box 8094

Madison, Wisconsin 53707

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

See reverse side, Copy 6, fo Please type or print clearly		pen - press hard.		Nisconsin Statutes 144 FORM 4400-66	9-80	\\	06963	
GENERATOR (SHIPPER	R) SECTION	1		*	<del></del>		• • • • • • • • • • • • • • • • • • • •	
1. COMPANY NAME	• • •		2. EPA IDENTIFICATION	NNO. 3. COMMENTS/SE	ECIAL INSTRUCTIO	ons		
Milprint Inc.	-		WID-000068155		:			
4. P.O. BOX OR STREET		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
P.O. Box 454 5. CITY, STATE, ZIP CO	DE	· · · · · · · · · · · · · · · · · · ·	6. TELEPHONE NUMBER					
_			1					
Milwaukee, WI	2320I	1	414 332-580		11 US DOT		1	1
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
10 55 0 11				Flammable		1. Solid 3. Mixture	1	i
40-55 Gallon Drum	2200	Waste Plann	able Liquid	Liquid	UN1993	2. Liquid	D001	18,000
				: : : : : : : : : : : : : : : : : : :		1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the info above named materials are proposed to the condition for transportation tation and the Wis. Department	operly classified, de according to the app	escribed, packaged, ma plicable regulations of	rkeď and labeled and are in p theÉU.S. Department of Trar	ispor-	SIGNATURE	16. NAME (Print)	:	17. DATE SHIPPED M D Y
			<del>)</del>	1		Floyd E. Lynei	.5	: 5
TRANSPORTER SECTION	ON	1/4		HAZARDOUS V	VASTE FACILITY	SECTION	<del></del>	
18. COMPANY NAME  Southeastern Va 20. P.O. BOX OR STREET	ate Treatmen	nt, Inc.	19.EPA IDENTIFICATION NO. CA000722083	1 1	hemical Servi STREET ADDRESS	ces, Inc.	. NO	360265
1015 New South	Marris Stree			421 South	Colfax Avenue			
Dalton, Georgia 23. COMMENTS			<sup>404</sup> 278-009	1 Griffith,	•		I .	) - 924 <b>-</b> 4370
23. COMMENTS	•			37. COMMENTS				
N. V.								
		. :					·	
I hereby certify that the above in proper condition for transp	re named materials a	and indicated quantity	(ies) has (have) been accepte shall be made to the facility	I hereby certify that received and accept 38. AUTHORIZE	t the above named ma	iterials and indicated quanti		
designated as Hazardous Wast 24. AUTHORIZED SIGNA	le Facility.	NAME (Print)	26. Date Accept	ed 38. AUTHORIZE	SIGNATURE MUNICU	"FD" DVPE	4	Date Accepted
Another Well	Carrie Alla	71 111	M / D / \	received and accept	t the above named ma	terials and indicated quanti	ty(ies) has (have	) been
I hereby certify that the abovin proper condition for transpessionated as Hazardous Wast	portation and Lackr	and indicated glantity nowledge that delivery	(les) has (have) been accepte shall be made to the facility		HAZĀRDOUS WAST	E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER C	COMPANY NAME	90 <b>% ₽</b>	28. EPA IDENTIFICATION NO.		SIGNATURE	44. NAME (Print)	4	5. Date Accepted
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accept	46. MAIL TO: Department of	Natural Resources I Waste Management		ssistance Teleph (608-266-3232) (800-424-8802)	one Number
		Tn20	4 E T-50	Box 8094 Madison, Wisco	nsin 53707	FOR DNR USE ONLY		
HAZARDOUS WAS	STE FACILIT	Y	4 K T-50 6 PM 9.1.82		ł	<u> </u>		

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

## HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

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MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<del></del>			
1. COMPANY NAME		·····	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		<del></del>
Milprint, Inc.	_		WID-000068155	}				(
4. P.O. BOX OR STREE	T ADDRESS						1	
P.O. Box 454						:		
5. CITY, STATE, ZIP CO	DDE .		6. TELEPHONE NUMBER	1		100		
Milwaukee, WI	53201		( 414) - 332-5800		± .			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
87-55 Gallon Drum	4785	Waste Plann	mable Liquid	Flammable Liquid	UN1993	1. Solid 3. Mixture X	D001	39,150
						1. Solid 3. Mixture 2. Liquid		33,133
						1. Solid 3. Mixture		
condition for transportation	roperly classified, de according to the ap	escribed, packaged, ma plicable regulations of	e and complete and that the rked and labeled and are in proper the U.S. Department of Transpor- onmental Protection Agency.	14	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
<u> </u>	<del></del>	<del></del>		1 17	De a comp	Floyd Lyneis		<u> </u>
TRANSPORTER SECTI	ION	<del></del>		HAZARDOUS W	ASTE FACILITY	SECTION		·
18. COMPANY NAME		•	19. EPA IDENTIFICATION	32. FACILITY NAM		02011011		DENTIFICATION
Couthagetern	Hants Manda	amb Tma	NO. GA000222083	American C	haniaal Carr	daa Yma	NO.	360265
Southeastern 20. P.O. BOX OR STREE	T ADDRESS	ent, Inc.	I GAUUUZZZUG3	American C	TREET ADDRESS	ACCE A LINC		
1015 New Sout				421 South	Calfey Even	<b>.</b>		
21. CITY, STATE, ZIP CO	DE	<u> </u>	22. TELEPHONE NUMBER	421 South	IP CODE	· · · · · · · · · · · · · · · · · · ·	36. TELEP	HONE NUMBER
Dalton, GA 3	0720	•	(404) 278-0091	Griffth. I	ĸ	1	( 219	924-4370
23. COMMENTS				37. COMMENTS	· <del>···</del>			
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I hereby certify that the abo	ve named materials	and indicated quantity	(ies) has (have) been accepted shall be made to the facility	received and accepted	1	terials and indicated quantit	· · · · · · · · · · · · · · · · · · ·	
designated as Hazardous Was	ste Facility.			38. AUTHORIZED	SIGNATURE	39. NAME (Print)	4 ر	0. Date Accepted
24. AUTHORIZED SIGNA	4 0	NAME (Print)		received and accepted	1	BOB MAUC terlals and Indicated quantit		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a sportation and I acki ste Facility.	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42.EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED		44. NAME (Print)	4	5. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	- 46. MAIL TO: Department of N Bureau of Solid V	atural Resources Vaste Management		sistance Telephi 508-266-3232) 300-424-8802)	one Number
		On d	oce 10.8.82	Box 8094 Madison, Wiscon		FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions.

# HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

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GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME		:	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milprint Inc.	•		WID-000068155		•			
4. P.O. BOX OR STREE	T ADDRESS	·		•				
P.O. Box 454			Į.		•			
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER	<b>.</b>	į			
Milwaukee, W	53201	·	( 414) 332-5800	•	•			
7. NUMBER & TYPE OF				10. US DOT	11. US DOT	12. PHYSICAL STATE	13. US EPA	14. SHIPPING
CONTAINER	8. GALLONS	d 9.	WASTE NAME	HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)		WEIGHT (Pounds
87-55 Gallon Drus	7-55 Gallon Drum 4785 Waste Flammable Liquid			Flammable Liquid	บท1993	1. Solid 3. Mixture X	D001	39,150
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in prope condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SI	GNATURE	16. NAME (Print)  Floyd Lyneis		17. DATE SHIPPED M D Y
L	15			<del></del>		r royu Lymers		<u> </u>
TRANSPORTER SECTI	ON			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME		Terre a Till da	19. EPA IDENTIFICATION	32. FACILITY NAM		-		DENTIFICATION
Southeastern Waste Treatment, Inc. GA000222083  20. P.O. BOX OR STREET ADDRESS				Amarican	hamical Car	ricae Inc	NO.	6360265
20. P.O. BOX OR STREET	T ADDRESS	BEHLE AMERICA	GROOLLAND	American (	TREET ADDRESS	VACCUA AUCA		<u> </u>
1015 New Some	h Harris Cty	eet.		421 South	Colfax Avent	1a		
1015 New Sout	DE		22. TELEPHONE NUMBER	35. CITY, STATE, Z	IP CODE	<u> </u>	36. TELEP	HONE NUMBER
Delton GA 3	20720		( 404) 278-0091	Griffth.	rn		(219	924-4370
Dalton GA 3				Griffth,				
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I hereby certify that the abo in proper condition for trans	ve named materials a sportation and I ackn	nd indicated quantity( owledge that delivery s	les) has (have) been accepted shall be made to the facility	I hereby certify that received and accepted 38. AUTHORIZED	the above named ma	terlals and Indicated quantit		
designated as Hazardous Was  24. AUTHORIZED SIGNA		1014F (D.1-1)	26. Date Accepted	38. AUTHORIZED:	SIGNATURE	19. NAME (PTINT)	_  "	10. Date Accepted M / D / Y
O. M. M.	Ry De	NAME (Print)	M / D / Y	phenon surriy that	in able and red man	francish maical de fat files	Link has (have	DAS 82
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	sportation and I ackn	owledge that delivery s	•	41. ALTERNATE H	AZARDOUS WASTI	E FACILITY NAME	42. EPA ID NO.	PENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE , 30.	NAME (Print)	31. Date Accepted M / D / Y		atural Resources Vaste Management		sistance Telephi 508-266-3232) 300-424-8802)	one Number
		Ondo	k 10.12.82 27	Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY		
HAZARDOUS WA	ASTE FACILIT	.Y	6°C	to 2047	14 7-50	10-18-52 6109		
the second of the second	TO CHARLINE SERVICE	NOON THE PROPERTY OF THE	Mark William Archer C. Control		and the second	• •		

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

1	MANIFEST	NUMBER
1		

A 06973

GENERATOR (SHIPPER	RISECTION		•						
1. COMPANY NAME	1,02011011	<u> </u>	2. EPA IDENTIFIC	CATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milprint Inc.	4		WID-0000681	155					,
4. P.O. BOX OR STREET	ADDRESS		RIM-MANAGE	1.7.		<b>,</b>	•		
P.O. Box 454			· ·						
5. CITY, STATE, ZIP CO	DE		6. TELEPHONE N	UMBER					
Milwaukee, WI			(414) 3:	32-5800			· · · · · · · · · · · · · · · · · · ·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	) i	‡ 16. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
87-55 Gallon Drus	4785	Waste Flaren	hla Timild		Plammable Liquid	UN1993	1. Solid 3. Mixture	D881	20 150
O(-22 GALION DICE	4703	HEALE FIELDS	mie ridnin			101333		1.0001	39,150
			i.	ė.	***	<b>.</b>	1. Solid 3. Mixture 2. Liquid		]
	ř i.		•		. Y		1. Solid 3. Mixture 2. Liquid	1	
This is to certify that the info				hat the	IS. AUTHORIZED SI	IGNATURE	16. NAME (Print)	-	17. DATE SHIPPED
condition for transportation	according to the ap	plicable regulations of t	the U.S. Department	of Transpor-	17 64		<u>,</u>		SHIPPED M D Y
tation and the Wis. Departme	ent of Natural Reso	urces or the U.S. Enviro	onmental Protection	Agency.	18/18/11	pelle	Ployd Lyneis		1-1
TRANSPORTER SECTION 18. COMPANY NAME	ON		19. EPA IDENTIFIC		HAZARDOUS W		SECTION	133 555 16	SENTIFICATION.
1			NO.	ATION	32. FACILITY NAM	vie .	1. P. 1.	NO.	DENTIFICATION
Southeastern W	aste Treatm	ent, Inc.	CA000222	1083	34. P.O. BOX OR S	Chemical Ser	vices, Inc.	INDOL	6360265
	•					, and the second			
1015 New South	Harria Str	eet	22. TELEPHONE N	UMBER	421 South 35. CITY, STATE, 2	Colfax Aveni	32	36. TELEP	HONE NUMBER
		,	1 1.	1 1			**	(010	)- 00/ / 270
Dalton GA 30 23. COMMENTS	720		<u> </u>	8-0091	Griffith, 37. COMMENTS				924-43/0
	•			.   }					
		•			American Section 1985	r		a jagan s	
÷ .	ž ·	, , , , , , , , , , , , , , , , , , ,			y 13			-	
			·		4/2m	la	FDUNF	EE	10 1 82
I hereby certify that the above	e named materials	and indicated quantity(	ies) has (have) been	accepted	I hereby certify that	he above named ma	terlals and Indicated quanti	ty(ies) has (have	e) been
in proper condition for transposition for transp	portation and Lacki le Facility.	nowleage that delivery	snail be made to the	iacility	38. AUTHORIZED	SIGNATURE	39. NAME (Print)		0. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date M /	Accepted . D / Y	·	<u> </u>			M / D / Y
	N <sup>t</sup>				t hereby certify that t received and accepted	the above named mat 1.	erlals and Indicated quantil	y(les) has (have	e) been
I nereby certify that the above in proper condition for transport designated as Hazardous Wast	re named materials a portation and Lackr e Facility.		•	accepted facility	41. ALTERNATE H	AZARDOUS WASTE	E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER (	COMPANY NAME		28. EPA IDENTIFIC	CATION	43. AUTHORIZED S	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date M / C	Accepted L		latural Resources		isistance Teleph 608-266-3232) 800-424-8802)	
		2 4 1	10:11:85		Box 8094 Madison, Wiscons	Waste Management sin 53707	Outside Wisconsin ( FOR DNR USE ONLY		<u>`</u>

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A 52323

MANIFEST NUMBER

323

Please type or print clear	iy using bali point	pen — press nard.	•			·		-
GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · · ·					
1. COMPANY NAME		D.	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS .		
Milnrint Inc	•		WTD=000068155					
Milprint Inc	TADDRESS						•	
DO BOY ASA		·;			· ``**			
P.O. Box 454	ODE		6. TELEPHONE NUMBER					
Milwaukee. W	deconsin s	. 2201	(414)332-5800					
•	Taconarn	7,3201	414 332=3800		11. US DOT	K	T	T
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	IDENTIFICATION NUMBER	12. PHÝSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pound
				Flammable		1 Solid 3 Mixture		
20-55 Gallon d	rum_1100	Waste Flamm	able Liquid	Liquid	IN1993	1. Solid 3. Mixture 2. Liquid	D001	9000
				111111111111111111111111111111111111111	0.41333	1. Solid 3. Mixture	1	***
						2. Liquid	Ĭ	1
						1, Solid 3. Mixture	1	
						2. Liquid		
			and complete and that the rked and labeled and are in proper	15. AUTHORIZED SI	IGNATURE	16. NAME (Print)		17. DATE SHIPPED
			the U.S. Department of Transpor-		والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج	ł'		MDY
tation and the Wis. Departm	nent of Natural Reso	ources or the U.S. Enviro	onmental Protection Agency.	The second of the second	Million .	Ployd E. Lyneis	•	8 117 12
				/ /		1 10yu-u- byuari	,	
TRANSPORTER SECT	ION			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM	NE		33. EPA II	DENTIFICATION
Southeastern W 20. P.O. BOX OR STREE	aste Treat	ment. Inc.	GAD000222083	American C	hemical Se	rvices, Inc.	LND016	360265
20. P.O. BOX OR STREE	T ADDRESS	•		34. P.O. BOX OR S	TREET ADDRESS			
1015 New South	Harris St	reet	· · · · · · · · · · · · · · · · · · ·	421 South (	Colfax Ave	nue		
21. CITY, STATE, ZIP CO	DDE	•	22. TELEPHONE NUMBER	35. CITY, STATE, 2	ZIP CODE		36. TELEF	PHONE NUMBER
Dalton, Georgi	a 30720		(404) · 278-0091	Griffith 37. COMMENTS	Indiana		(219	<sup>1.</sup> 924-4370
23. COMMENTS				37. COMMENTS				•
				27.00		•		
						•		
			·					
I hereby certify that the abo	ive named materials	and indicated quantity	les) has (have) been accepted	received and accented	a . //	terials and indicated quanti	· · · · · · ·	<u></u>
designated as Hazardous Wa	ste Facility.			38. AUTHORIZED	SHOPNATURE/	39. NAME (Print)		10. Date Accepted
24. AUTHORIZED SIGNA	ATURE 25.	NAME (Print)	26. Date Accepted	Ganys	May by	GEORGE HU	RPMY	8"/19/82
Willen for	·/! //	111 Burg 15	149 8115182			terials and indicated quantit	y(ies) has (have	
t hereby certify that the abo in proper condition for tran- designated as Hazardous-Wa	sportation and Lack	and indicated quantity( nowledge that delivery	les has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOVSWAST	E FACILITY NAME	42. EPA IC NO.	ENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	]4	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	46. MAIL TO: Department of N			608-266-3232)	one Number
		T. 2100	T 50	Bureau of Solid V Box 8094 Madison, Wiscon	Naste Management sin 53707	Outside Wisconsin ( FOR DNR USE ONLY	800-424-8802)	

### SOUTHEASTERN WASTE TREATMENT, INC.

P.O. BOX 1697 • DALTON, GEORGIA 30720 • 404-278-0091

Plants:

No. 1 1015 New S. Harris St.

No. 2 1025 New S. Harris St.

Offices: 441 N. Hamilton St.

Date issued:

12

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В

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82

# HAZARDOUS WASTE MANIFEST STATE OF GEORGIA

Manifest Document No.

7 2

O

	IDENTIFICA	TION INFORMATION	
EPA ID Number	NAME	MAILING ADDRESS	TELEPHONE
Generator WID000068155	Millprint, Inc.	4200 N. Holton Street Milwaukee, WI 53201	414/332-5800
Transporter # 1 GAD000222083	Southeastern Waste Treatment, Inc.	P. O. Box 1697 Dalton, GA 30720	404/278-0091
Transporter # 2			
TSDF* IND016360265	American Chemical Services	420 South Colfax Griffith, IN 46319	219/924-4370

### **WASTE INFORMATION** EPA Hazardous Waste DOT Shipping Name, Class & I.D. Number Total Containers Weight Quantity Νo Number Type Code 20 Waste flammable liquid NOS D001 Drums UN1993

### **EMERGENCY INFORMATION**

NATIONAL RESPONSE CENTER: 1-800-424-8802

GENERATOR: (414)332-5800

GEORGIA ENVIRONMENTAL PROTECTION DIVISION: (404) 656-4300

DISPOSER: (219) 924-4370

### COMMENTS - SPECIAL HANDLING

### **CERTIFICATIONS**

This is to certify that the above-named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, the U.S. Environmental Protection Agency, and the Georgia Department of Natural Resources.

Skip Schneble

**Authorized Representative of Generator** 

omos Delman Signature 8//1/83 Date:

Date

This is to certify acceptance of the hazardous waste shipment described above.

Southeastern Waste Treatment, Inc.
Authorized Representative or Transporter 1

Signature

8-17-3 Date:

Authorized Representative or Transporter-2

Signature

Date:

This is to certify acceptance of the hazardous waste shipment described above for

 $\Box$  T  $\Box$  S  $\Box$  i

Walt Wagoner

Signati

0.19.93

Authorized Representative of TSDF

Signature 0

Date:

Treatment, Storage or Disposal Facility

|--|

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMEN P.O. Box 7035 Indianapolis, IN 46207-7035	π					
PLEASE PRINT OR TYPE (Form designed for us	se on elite (12-pitch) typew	riter.)	Form A	11.		039. Expires 9-30-91
UNIFORM HAZARDOUS 1. Generator's US WASTE MANIFEST W I D 0 0		Manifest Bocument N		Page 1 Information for the latest Contract of 1 State latest	ation in the puired by J. F. H and aw.	ne shaded areas is Federal law, but d I are required by
3. Generator's Name and Mailing Address			Α.	State Manifest Doo		
MILSCO MFG.CO.			110	MA 030	D961	∩ <b>7</b>
9009 N. 51st. STREET - MILWAUKEE.	WISCONSTN		111	State Generator's I		<del></del>
4. Generator's Phone ( 414 ) 354-0500	53223	ı	3.	State Generators :	<b>.</b>	
5. Transporter 1 Company Name	. 6. Use EPA ID Number		C.	State Transporter's	i ID	#11400
E&K HAZARDOUS WASTE SERVICES, INC.	W I D 9 8 2 2	1. 0. 5. 2	🗖	Transporter's Phon	e// 1 1 1 1	#11608
7. Transporter 2 Company Name	8. Use EPA ID Number	1. 9. 5. 2		State Transporter's	<del></del>	458-6030
7. Hallsporter E delitipatify Hallie			F	Transporter's Phon	e -	
9. Designated Facility Name and Site Address	10. Use EPA ID Number			State Facility's ID		
AMERICAN CHEMICAL SERVICES	TO. USE CFA ID NUMBER		J.	:		
420 S. COLFAX	I		H.	Facility's Phone		
GRIFFITH, IN 46319	I. N. D. O. 1. 6. 3.	6. 0. 2. 6	. 5	(219) 92	24-437	ro
11. US DOT Description (Including Proper Shipping Name, Hazard	Class, and ID Number)	12. Conta	iners Type	13. Total Quantity	14. Unit Wt/Vol.	L Waste No.
a Prq", Waste Flammable Liquid, N.O. Liquid, Un1993, (EPA IGNITABILITY,	S., FLAMMABLE F003).	007	DH	0.0585	G	F 0 0 3
D. "RQ", WASTE ADHESIVE, FLAMMABLE LI UN1133, (EPA IGNITABILITY).	QUID, P-OCI					
		170.1	1277	0.0.0.5.5	147	D 0 0 1
c.						
		)	.		1	
	<del></del>			<del> </del>	<del>†                                      </del>	<del>                                     </del>

J. Additional Descriptions	for Materials	Listed Above
----------------------------	---------------	--------------

SO D001

15. Special Handling Instructions and Additional Information

NOTIFY CBC TRANSPORT (414) 764-7005 WITH ANY LOAD DISCREPANCIES. (OFF SPEC. MATERIAL)

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

	Tettan A (wencon	Signature Day Vear Day Vear
	17. Transporter 1 Acknowledgement of Receipt of Materials	11111
ļ	Printed/Typed Name Kennath Police	Signature Month Date Year Vision 5 17 89
	18. Transporter 2 Acknowledgement of Receipt of Materials	// ***
	Printed/Typed Name	Signature Date Day Year
_	19. Discrepancy Indication Space	
	20. Facility Owner or Operator: Certification of receipt of hazardous material	Is covered by this manifest except as noted Item 19.  Signature Month, Day, Year

EPA Form 8700-22

Previous editions are obsolete. State Form 11865 (R/4-88)

0017044

NA 0309607

REV. # 4

TO BE COMPLETED BY WASTE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

MILTON INDUSTRIES INC	4500 W. CORTLANI	D 312235940	0 0 3 1 6 0 0 0 9 7 Z 6 Generator Number 24
CHICAGO J	Address 60639 State Zip		1 L D 0 0 5 0 8 6 2 5 1
· · · · · · · · · · · · · · · · · · ·		HAULER(S)	<del> </del>
ROSKIN MOTOR SERVKE 4710	<u>O W. ROOSEVE</u> LT RI HAUIER ADDRESS. ICAGO, TL 3	) )	S W.H. Registration Number $\frac{1}{2}$ $\frac{4}{2}$ $\frac{0}{2}$ $\frac{0}{2}$ $\frac{0}{2}$ $\frac{4}{2}$
Hauler Name CH	ICAGO, IL 3	122617236 Phone Number	1 L D 0 4 5 6 9 5 7 1 5
Hauler Name	Hauler Address		S.W.H. Registration Number 32 38
		Phone Number	EPA Number
4 0	DESTINATION - DISPOSAL S	TORAGE OR TREATMENT SITE	0.10.00
AMERICAN CHEMICAL	Address		7 / 8 0 8 7 0 Z
GRIFFITH	IND. 40	6319 2199244	370 1 N D O 1 6 3 6 0 Z 6 5
City	State	Zip Phone Number	EPA Number
Alternate (Facility, Name)	Address	· · · · · · · · · · · · · · · · · · ·	39 Site Number 46
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE GENERATOR PERC	HLORETHYLENE		HASE LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAN			Hinnid Caspane Solid)
SHIPPING DESCRIPTION. HAZE	ARD CLASS. HLORINATED	11111097	FROI
WASTE SOLVENT	SULVENT 12 ORM-E	<u>U N I 8 9 7</u>	FPA HW Number
	WEIGHT FOR LE.P.A. USE MUST BE	DUANTITY OF WASTE DELIVERED	OO//OGALLONS (Circle One)
D.O.T. USE TONS (circle one)	CONVERTED TO CU. YDS FOR GAL.	47	52 50 100.
METHOD OF SHIPMENT (Circle One) (DRUMS	Number TANK TRUCK	OPEN TRUCK OTHER (Specify)	<del></del>
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PF IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH	ROPERLY CLASSIFIED. DESCRIBED. PAR IE ILLINOIS DEPARTMENT OF TRANSPO	KAGED. MARKED, AND LABELED AND RTATION AND I.E.P.A.	IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	IRMATION	errymush	at DATE 11-15-83
WASTE HAULER		(Authorized Signature)	
HEREBY CERTIFY THAT THE ABOUT THE DEST NATION AS INDICATED		Y HAS BEEN ACCEPTED IN PROPER CON	DITION FOR TRANSPORT AND I ACKNOWLEDGE
" (Sol Valenta	<u>.</u>	<u> </u>	11/61 73
(Authorized Synature)	<del></del> :		DATE: 1/1 1/6 1 3
(2) (Authorized Signature)	<del></del>	·	DATE:
DISPOSAL, STORAGE, OR TREATMENT FACILITY	<u> </u>	HAZARDOU	S WASTE SUBJECT TO FEE :YES NO
I HEREBY CERTUIN HAT THE ABOVE DESCRIBED WASTE AND	) INDICATED QUANTITY HAS BEEN ACC		
(Aghory d Signature)	_		DATE: $\frac{1}{\infty}$ $\frac{1}{1}$ $\frac{1}{2}$ $\frac{5}{5}$ $\frac{3}{5}$
COMMENTS OR SPECIAL INSTRUCTIONS.			
,			
	*24 HOUR EMERGENCY AND	SPILL ASSISTANCE NUMBERS*	
IN ILLINOIS. 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA	PART - 3 SITE PART - 4 HA		OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675 RT 5 GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST



MILTON INDUSTRIES INC.	4500 W. CORTLAN	D 31223594	00 0 3 1 L 0 0 0 7 7 2 6  Generator Number 24
City ( It 60	ILLINOIS 606-	_	1 L D D O S O S 6 2 5 1
ROSKIN HOTOR SERVICE	1710 W. ROOSEVELT	ASTE HAULER(S)    (1)	S.W.H. Registration Number 140000 25 12045695715 EPA Number
Hauler Name	Hauler Address		S.W.H. Registration Number 32 38
		Phone Number	EPA Number
AMERICAN CHEMICAL SER	VICE DESTINATION — DISPO	SAL STORAGE OR TREATMENT SITE	7 1 8 0 8 9 0 2 30 Sile Number 40
GRIFFITH City	INDIANA	46319 219924 <sup>L</sup> Zip Phone Number	1370 1 ND 0 16560265
Alternate (Facility Name)	Address		39 Site Number 40
City	State	Zip Phone Number	EPA Number
TO BE COMPLETED BY WASTE NAME: +	ERCHLORETHYLE	N=	Muse LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THE SHIPPING DESCRIPTION:  WASTE SOLVENT  WEIGHT FOR 1182 TONS (circle on TONS)	HAZARD CLASS:  CHLORIKUNTED  SOLVENT 12 ORM-  WEIGHT FOR LE.P.A. USE MUST 1	E UN N 1 S 9 7	EPA HW Number
	RUMS 3 ) TANK TRUCK	OPEN TRUCK OTHER (Specify	
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WAST IN ACCORDANCE WITH THE APPLICABLE REGULATION	E ARE PROPERLY CLASSIFIED. DESCRIBE IS OF THE ILLINOIS DEPARTMENT OF TO	D. PACKAGED, MARKED, AND LABELED AN ANSPORTATION AND I.E.P.A.	
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITT	EN INFORMATION	(Authorized Signature)	DATE: 1-25-83
WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS IN	THE ABOVE-DESCRIBED WASTE AND QUADICATED:	ANTITY HAS BEEN ACCEPTED IN PROPER C	ONDITION FOR TRANSPORT AND I ACKNOWLEDGE
(1) Manager Signature) (1)	in .	-	DATE: 7 1 281 83
(2) (Authorized Signature)			DATE:/
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		HAZARDO	OUS WASTE SUBJECT TO FEE YES NO
HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WA	STE AND INDICATED QUANTITY HAS BEEN		
COMMENTS OR SPECIAL INSTRUCTIONS:			
		N	
	*24 HUIB EMEBGENO	AND SPILL ASSISTANCE NUMBERS*	
IN ILLINOIS 217 / 782-3637 DISTRIBUTION PART - 1 GENERATOR PART -			OUTSIDE ILLINOIS. 800 / 424-8802 or 202 / 426-2675 PART 6 - GENERATOR

REV # 4

TO BE COMPLETED BY WASTE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0628847

Authorization Number

MILTON INDUSTRI	ESINC 4	500 W.	312235940 Phone Number	00 0310	2000972 Generator Number	2 G
C.HICAGO City	State	60639 1		1 L DO	0 5 0 8 6 2 5 EPA Number	51
***************************************		WASTE HAULE	R(S)			
_		^	•			
ROSKIN MOTOR SE	EVICE 4710W	· Koosevelt	•	S.W.H. Registration Numb	er <u>1 4000</u>	<u>= 4</u>
nauel wante	CHICAGO"	312	2617236 Phone Number	<u>ll D</u>	0456957 EPA Number	15
	11-1-1-1-1			S.W.H. Registration Numb	oer	
Hauler Name	Hauler Address	٠			32	36
			Phone Number	£	EPA Number	
	DESTINA	ATION - DISPOSAL STORAG	GE OR TREATMENT SITE			
	ERVICE	·	<u>.                                    </u>		1 8 0 8 9 6 Site Number	<u> 2                                   </u>
(Facility Name)		Address		. 35	_	
GRIFFITH	State	4631 Zip	9 2199244 Phone Number	370 1 ND	EPA Number	<u>65</u>
Alternate (Facility Name)		Address	<del></del>	39	Site Number	40
City	State	Zip	Phone Number		EPA Number	
TO BE COMPLETED BY WASTE GENERATOR WASTE NAME:	PEZCHLORE	ニナソレモルド	WASTE P	HACE LIQU	10	
THE SPECIAL WASTE BEING TRANSPORTED UNDE SHIPPING DESCRIPTION	R THIS MANIFEST IS OF THE HAZARD CLASS:	DOT HAZARD CLASSIFICATIO	ON INDICATED IMMEDIATELY BE	ELOW: (Lic	guid. Gaseous. Solid)	<del></del>
WASTE SOLVEN	T IZORM	<u>- E</u>	U N 1 8 9 7 UN or NA Number	EPA HW	Number	
WEIGHT FOR SO GE TONS (circle	WEIGHT FOR I.E.P CONVERTED_TO CU		ITY OF WASTE DELIVERED: 47	00119	· · · · · · · · · · · · · · · · · · ·	One) 1 53
METHOD OF SHIPMENT (Circle One)	(DRUMS 2 )	TANK TRUCK OPEN	TRUCK OTHER (Specify)			
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I HEREBY AGREE TO AND CERTIFY THE ABOVE WE	RITTEN INFORMATION		thorized Signature)	DATE:	5.4.83	
		(Aut	monzed Signature)			—
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(Authorized Signature)					54 / /	59
(2) (Authorized Signature)	<del></del>			DAT	E:	
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THEREBY COMMITTED THE ABOVE CONTROL	WASTE AND INDICATED GOAL	THE THE BEEN ACCEPTED	AT THE SHE SPECIFIED ABOVE		-1, ~ 15	د .
(Authorized Signature)	<del></del>			DA	re:	- 35
COMMENTS OR SPECIAL INSTRUCTIONS:						
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	*24 1101	JR EMERGENCY AND SPILL	ACCICTANCE MUNICIPAL			
IN ILLINOIS, 217 / 782-3637  DISTRIBUTION PART - 1 GENERATOR PAR	T - 2 IEPA PART - 3 SIT			OUTSIDE ILLINOIS	5. 800 / 424-8802 or 202 / 42	26-2675

TO BE COMPLETED BY WASTE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0628849

Authorization Number

4500 W. CORTLAND 312-235-9400 MILTON INDUSTRIES INC <u>03160009726</u> LD005086251 60639 CHICAGO WASTE HAULER(S) ROSKIN MOTOR SERVKE 4710 W. ROOSEVELT RD-122617236 S.W.H. Registration Number Hauler Name Hauler Address 1 2 1 g . 1 Phone Number EPA Number DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE AMERICAN CHEMICAL Address N DO 16360265 GRIFFITH IND -Alternate (Facility, Name) Address Site Number State Phone Number EPA Number TO BE COMPLETED BY WASTE GENERATOR 1001D terchlorethylene WASTE PHASE: WASTE NAME: (Liquid Gaseous Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: HAZABOCHASS DZENATED UN 1 8 9 7 FOOI EPA HW Number SOLVENT 120RM-F QUANTITY OF WASTE DELIVERED: 000/ WEIGHT FOR I.E.P.A. USE MUST BE WEIGHT FOR 800 2 CU. YDS. CONVERTED TO CU. YDS. OR GAL. TONS (circle one) DOT USE METHOD OF SHIPMENT (Circle One) TANK TRUCK OPEN TRUCK. OTHER (Specify) (DRUMS Number THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED. DESCRIBED PACKAGED. MARKED. AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P. much I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED. DATE: 8/15/ 63 (Authorized Signature) DISPOSAL, STORAGE, OR TREATMENT FACILITY\* HAZARDOUS WASTE SUBJECT TO FEE THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: (Authorized Signature) COMMENTS OR SPECIAL INSTRUCTIONS \*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\* N ILLINOIS: 217 / 782-3637 OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675 DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

TO BE COMPLETED BY WASTE GENERATOR

### STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

Authorization Number 920944

(217) 782-6760 SPECIAL WASTE HAULING MANIFEST

MILTON IND - INC -	4500 W. Cor	TLAND 31	2 2 3 59400 Phone Number	0 3 1 6 0 0 Generator Numb	2 9 7 Z G
CHICAGO CITY	State	2639 20	_	1 L D 0 0 5 0 8	<u>36251</u>
		WASTE HAULER(S	)	-	
ROSKIN MOTOR SERVKE	4710 W-ROOSEV			H. Registration Number 125 4	•••
		Ph	359400 one Number	LL DO456 EPA NUMB	)
Hauler Name	Hauler Address	-	S.W.	H Registration Number	38
		——————————————————————————————————————	ione Number	EPA Numi	oer
	DESTINATION — D	ISPOSAL STORAGE O	R TREATMENT SITE	*	<del></del>
AMERICAN CHEMICAL (Facility Name) SERVICE			_	9180	8 9 Z Number 46
(Facility Name) SERYICE	Address	1/20	2.00-4	<b>本</b> 、	_
GRIFFITH 1.	State	46319 Zip	Phone Number	10 1 N DO 1 6 3	60265
Alternate (Facility Name)	Address	·. ·	- -	•	Number 46
City	State	Zip	Phone Number	EPA Numt	ner
TO BE COMPLETED BY WASTE GENERATOR  THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS			WASTE PHASE INDICATED IMMEDIATELY BELOW:	diama Cannous C	olic)
SHIPPING DESCRIPTION:	HAZARD CLASS: CHLORINATED SOLVENT 12 ORM-E	<u>_</u>	N 1 8 9 7	FOOL	
WEIGHT FOR LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MI CONVERTED TO CU. YDS. OR	UST BE QUANTITY	OF WASTE DELIVERED: 0	00055 OGA	LLONS (Circle One) . YDS.
METHOD OF SHIPMENT (Circle One) (DRU		JCK OPEN TRI	UCK OTHER (Specify)		
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE A IN ACCORDANCE WITH THE APPLICABLE REGULATIONS			AND I.E.P.A.	•	,
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN	INFORMATION	Kerry	vilustrak ized Signature)	DATE: 1-18	.84
WASTE HAULER  I HEREBY CERTIFY THAT THE DESTINATION AS INDIC	HE ABOVE-DESCRIBED WASTE AND		99 11 5	ON FOR TRANSPORT AND I ACKNOWL	EDGE
(1) Approvized Signature)	<u> </u>			. DATE:	
(2) (Authorized Signature)				DATE: //	81 8/
DISPOSAL, STORAGE, OR TREATMENT FACILITY*		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	HAZARDOUS WA	STE SUBJECT TO FEE YES	NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WAST	E AND INDICATED QUANTITY HAS	BEEN ACCEPTED AT		1.50	ラファ さこ
(Authorized Signature)				DATE:/	
COMMENTS OR SPECIAL INSTRUCTIONS:					
IN ILLINOIS: 217 / 782:3637  DISTRIBUTION PART -: GENERATOR PART - 2 IE		ENCY AND SPILL AS	PART - 5 IEPA PART 6	OUTSIDE ILLINOIS 800 / 424-88 GENERATOR	02 or 202 / 426-2675

532-610 C 67 8/81

O BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS.

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

	(217) 782 SPECIAL WASTE HAL		Authorization Number 2 2 2 2 4
MILTON INDUSTRIES 4	1500 W-CORTLAN	D3122359400	0316000912
(Company Name) CHICAGO City	Address  11 60639  State C 2ip	Phone Number	L Dooso8625 EPA Number
	Hauler Address	5.W.F 2.2.6.1.7.2.3.6. Phone Number	1. Registration Number 1 40000  1 LD 0 4569 571  EPA Number  1. Registration Number
Hauler Name	Hauler Address	Prione Number	EPA Number
AMERICAL CHEMICAL  (Facility Name) SERVICE  GRIFFITH	DESTINATION + DISPOSAL STOR		9186890 -7 Site Number 01ND01636026
City  Alternate (Facility Name)	State Zip Address	Phone Number	EPA Number 39 Site Number
TO BE COMPLETED BY WASTE GENERATOR	Suite Zip	Phone Number !!	EPA Number
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MAN SHIPPING DESCRIPTION: HAZ	HEST IS OF THE DOT HAZARD CLASSIFICAT ARD CLASS:	WASTE PHASE: HON INDICATED JAMEDIATELY BELOW:  LIN OF NA NUMBER  UN OF NA NUMBER	(Liquid, Gaseous, Solid):  FOOT  EPA HW Number
D.O.T. USE DONS (circle one)  METHOD OF SHIPMENT (Circle One) (DRUMS	202	TITY OF WASTE DELIVERED. QQ	O GALLONS (Circle On 2 CU. YDS. 1
THIS IS TO CERTIFY THAT THE ABOVE NAMEO WASTE ARE PI IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF TH A HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFO	RMATION PERSONNEL PROPERTY OF TRANSPORTATION	Mushak	ROPER CONDITION FOR TRANSPORTATION.  DATE: 4-6-84
i MEREBY CERTIFY THAT THE ABI THE DESTINATION AS INDICATED:  (1)  (2)  (Authorized Signature)	DVE-DESCRIBED WASTE AND QUANTITY HAS	unorized Signature) BEEN ACCEPTED IN PROPER CONDITION	FOR TRANSPORT AND I ACKNOWLEDGE  DATE: 5 LC 8  DATE: 6 Z Z Z 8
DISPOSAL, STORAGE, OR TREATMENT FACILITY	INDICATED QUANTITY HAS BEEN ACCEPTED	HAZARDOUS WASTI	E SUBJECT TO FEE YES NO
(Multiple Signature)			DATE:
COMMENTS OR SPECIAL INSTRUCTIONS:	16/		
IN ILLINOIS: 217 / 782-3637 DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA REV. # 4	24 HOUR EMERGENCY AND SPILL A PART - 3 SITE PART - 4 HAULER	SSISTANCE NUMBERS:	OUTSIDE ILL'INDIS: 800 / 424-8802 of NERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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	Transporter 2 Company			3. US EPA II			ois Transporter		
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need to provide the information may result in a civil penalty againent up to 5 years. This form has bend approved by the Forms

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD. SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761 .

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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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s authorized to require, pursuant to lithois Revised Statutes, 1983, Chapter 1117/2 Section 21, that this information be subminot to exceed \$25,000 per day of violation. Fais-fication of this information may result in a line up to \$50,000 per day of FACILITY COPY - PART 3.

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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P.O. Box 7035

Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

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Indianapolis, IN 46207-7035

EPA Form 8700-22A (Rev. 11-85)

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Form Approved OMB No. 2000 0404 Expires 7 31 86

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T 20. Facility Owner or Operator: Certification of	receipt of hazardous materials covered by th	s manifest except	ng led i	terpy 19.		<del></del>
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EPA Form 8700-22A (Rev. 11-85)

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Division of Faul Londitol County - Intalling
Indiana State Board of Health
P.O. Box 7035

Indianapolis, IN 46207-7035 Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

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Division of Land Pollution Control - Manifest DO NOT WRITE IN THIS SPACE

Indiana State Board of Health P.O. Box 7035 Indianapolis, IN 46207-7035

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UNIFORM HAZARDO	eergree is, asc on	elite (12-pitch) typewriter)	Fo	rm Approv	ed OMB No.	2000 0404 EX	pires / 31 86
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dianapolis, IN 46207-7035	

Please print or type. (Form designed	for use on elite (12-pitch) typewriter)			ved OMB No.	2000 04	- Expir	es / 31 86
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Form Approved OMB No. 2000 0404 Expires 7 31 86

ı	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Ma	nifest	2. Page 1 of Inf	ormation in th	e shaded areas
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	5. Transporter 1 Company Name  Chit Vill Mark Torik Torik A  7. Transporter 2 Company Name	6. US EPA ID Number		7V5	O 316.00 C. State Transporter's I	Phone 3/2 -	261-7236
	9. Designated Facility Name and Site Address  19.10 CC/C-1-1		1 1 1 1	1.1	F. Transporter's F G. State Facility's	به روز (ID ماهم) کارتر پرهو (ID	केंद्रसम्बद्धाः द्वाराधिकसम्बद्धाः
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EPA Form 8700-22 Previous editions are obsolete. State Form 11865 (R/4-88) In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INDIANA DEPARTMENT OF ENVIRONMENTAL MA	NAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MA	NAGEMENT
P.O. Box 7035	
Indianapolis, IN 46207-7035	

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15. Special Handling Instructions and Additional Information	· · · · · · · · · · · · · · · · · · ·				
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16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of	of this consignment ar	re fully and ac	curately described ab	oove by	
proper shipping name and are classified, packed, marked, and label according to applicable international and national government regu	lations.	sects in proper	condition for transpo	ort by nighv	/ay
If I am a large quantity generator, I certify that I have a program	in place to reduce th	e volume and	toxicity of waste ge	enerated to	the degree I
determined to be economically practicable and that I have selecte which minimizes the present and future threat to human health as	na tne environment; (	JH, ii i am a s	mali quantity genera	ator, I have	tly available to made a good
effort to minimize my waste generation and select the best waste m		hat is available	to me and that I car	n afford.	
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1 20 Facility Owner or Operator Certification of receipt of bazardous material					
Rented/Typed Name/	Is covered by this manil	e cept as r	oted Item 19.	<del></del>	

EPA Form 8700-22 Previous editions are obsolete. State Form 11865 (R/4-88)

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(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS 1. Generator's USE WASTE MANIFEST 1. L.D.O.O.5	08.6.25.1 D	ment No.	ired by Federal law, but F, H and I are required by
3. Generator's Name and Mailing Address MILTON IN	DUSTRIES INC	A. State Manifest Docu	ment Number
4500 W. CORTLAI	UD 195	INA 032	
4. Generator's Phone (312 ) 235 - 9400		B. State Generator's JD	
5. Transporter 1 Company Name	6. Use EPA ID Number	C. State Transporter's	
ROSKIN MOTOR FREIGHT  7. Transporter 2 Company Name	1.L.D.O.4.5.6.9.5 B. Use EPA ID Number	.7.1.5 D. Transporter's Phone  E. State Transporter's	210 210
ATO DESCRIPTION OF ACTION FOR SACRET		F. Transporter's Phone	3,000,000,000
9. Designated Facility Name and Site Address  AMERICAN CHEMICAL DERI	0. Use EPA ID Number	G. State Facility's ID	45.73
GRIFFITH IND - 46319	an een word ook Misist	9180890 H. Facility's Phone	200
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11. US DOT Description (Including Proper Shipping Name, Hazard C	lass, and ID Number)	. Containers 13. Total	14. Unit Waste No.
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J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Was	es Listed Above
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15. Special Handling Instructions and Additional Information			
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determined to be economically practicable and that I have se which minimizes the present and future threat to human hea	elected the practicable method	of treatment, storage, or dispos	al currently available to me 🗀
effort to minimize my waste generation and select the best wa Printed/Typed Name	ste management method that i	is available to me and that I can a	ifford.
JERRY MIRSHAK	1 /1/10	Whate	Month Day Near 1
17. Transporter 1 Acknowledgement of Receipt of Materials	1/2		
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18. Transporter 2 Acknowledgement of Receipt of Materials		- florid	<del></del>
Printed/Typed Name	Signature		Month Date Year
19. Discrepancy Indication Space	-		
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20. Facility Owner or Opeyator: Certification of receipt of hazardous m.	sterials covered by this manifest	except 25 noted Item 19.	
Gright Type Name	Signature	Mall)	1400 190 R.C.
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In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

Previous editions are obsolete. State Form 11865 (R/4-88)

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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610 LPC 62 8/81

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	3.	. Generator's Name and Mailing Address	MILTON INE			A.Illino	s Manifest Docu		umber
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	9.	. Designated Facility Name and Site Address	ss 10.	US EPA ID N	umber	GIllino	is The so		
		AMERICAN CHEM	ical Serike						390002
	l	GRIFFITH, IND. 463	19 LIND	016360	265		ity's Phone 2*		
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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

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DO NOT WRITE IN THIS SPACE

Indianapolis, IN 46207-7035 Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manufest 2. Page 1 of Information in the shaded areas WASTE MANIFEST 3. Generator's Name IN 089218 CHICTUS IL GOGZY 63 660 597V C. State Transporter's ID D. Transporters Phone 2 (2) ひこのとだらん E. State Transporter's ID. 9. Designated Facility Name and Site Address
10. US EPA ID Number
AMF 21 CAN CHEMICAL SERVICE G. State Facility's ID 9/3089 0007 H. Facility's Phone GRIFFITH WO 463 MMANIOLIGNERS 2127673400 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit Waste No Wt/Vol Quantity PERCHLOR ORMA 15. Special Handling Instructions and Additional Information classified, packed, marked, and labeled, and are in all respects in p boar condition for transport by highway according to applicable international and national Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month Day ERRY MIKSHAK 2/3 Printed/Typed Name Signature Month Day 生物物的 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name 19. Discrepancy Indication Space 20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

T.S.D. DETACH AND RETAIN THIS COPY

J44

# HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in rink, in inc. Carbon, and retained by the	delible Pencil, or in Agent.	. <u>M</u> A	NIFEST D	OCUMEN.	T NUMBER
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packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrie under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise or any of, said property over all or any portion of said route to destination and as to each party at any time bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing and his assigns.	se to deliver to another c interested in all or any s	carrier on the route to aid property, that eve	said destination. It y service to be perf	is mulually agreed ormed hereunder sha	as to each carrier of all ill be subject to all the
ALTERNATE DESTINATION (EMERGENCY ONLY)	EN		RESPONS	SEINFOR	MATION
T/S/D FACILITY	CONTACT				·
Address	National R	Phone	enter	1-80	00-424-8802
Destination of the statements	, tational n	.coponse O	>11C1	in D. C.	426-2675
This is to certify that the above named materials are properly classified				ed, and are i	in proper condition
for transportation according to the applicable regulations of the Depart	ment of Transpo	ortation and th	e E.P.A.		
Generator Signature			Date	<u> 47 - 7</u>	<u> </u>
TRANSPORTER #1		<u> </u>	E.P.A. ID No	)	10 2 7 2
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TRANSPORTER #2			E.P.A. ID No	0	
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Transporter No. 2 Signature  This is to certify acceptance of		•	ment.		
Transporter No. 2 Signature  This is to certify acceptance of	the hazardous	waste ship	Datestorage, or	disposal.	
Transporter No. 2 Signature  TREATMENT/STORAGE/DISPOSAL FACILITY  T/S/D FACILITY  This is to certify acceptance of the hazard	the hazardous	waste ship	Date		



spill call Indiana Office of Environmental Response at 317/243-5155 (day), sponse Center at 800/424-8802 or 202/426-2675.

In case of a spill call Indian National Response Center

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

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<b>PLEASE</b>	PRINT	UH	ITPE	

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

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16. GENERATOR'S CERTIFICATION: I hereby declare proper shipping name and are classified, packed	that the contents of this consignment are	fully and accurately described abo	we by
according to applicable international and national	l government regulations.		
If I am a large quantity generator, I certify that determined to be economically practicable and which minimizes the present and future threat t	that I have selected the practicable meth	od of treatment storage or dispo-	tal currently available to me 💆
effort to minimize my waste generation and select Printed/Typed Name	t the best waste management method the	at is available to me and that I can	afford. Date
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17. Transporter 1 Acknowledgement of Receipt of Mater Printed/Typed Name	Signature	<u> </u>	Date
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18. Transporter 2 Acknowledgement of Receipt of Mater Printed/Typed Name	Signature		Date
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20. Facility Owner or Operator: Certification of receipt of		st except as noted Item 19.	
STEVE KULAUCK	Signatur	fellend	19908188
orm 8700-22 (Rev. 9-86) DISTRIBUTION;	PAGE 1 (white) TSD MAIL TO GENERAT	000	E 5 (light blue) TSD COPY

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

DISTRIBUTION:

PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM

PAGE 6 (canary) GENERATOR COPY PAGE 7 (white) TRANSPORTER 1 COPY PAGE 8 (white) TRANSPORTER 2 COPY In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

	Milwaukee Metropolitan Sewase District			State Manifest Do	126/	57
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ŀ		076	:	Facility's Phone		
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١	which minimizes the present and future threat to human health and the environment, effort to minimize my waste generation and select the best waste management method	OR, if I am	a smai	I quantity gener	ator, I have	
1	Printed/Typed Name Signature					Date Voc
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In case of a spill call Indiana Office of Environmental Response National Response Center at 800/424 8802 or 202/426-2675.

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

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3	WASTE MANIFEST WTD: 0.7.1.1.5.4.6.1.1. 0000.3 or I tems 0.F. and I are required by State law.  Generator's Name and Mailing Address  A. State Mainfest Document Number
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4	Generator's Phone ( 414 ) 377-8920
5	Transporter 1 Company Name 6. Use EPA ID Number C. State Transporter's ID 11536
-	Transporter 2 Company Name  8. Use EPA ID Number  E. State Transporter's ID A STATE
	F.Transporter's Phone (VC) (WH) - 1/4
9	Designated Facility Name and Site Address 10. Use EPA ID Number G. State Facility's ID
-	American Chemical service
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1	i, GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by  proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway
	according to applicable International and national government regulations ఆటకు గ్రామంలో సంజయం ఇంతుకు 2237510921624 లో 28001000135
	off I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me
	which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.
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EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete. State Form 11865

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Division of Land Pollution Control - Manifest Indiana State Board of Health P.O. Box 7035 Indianapolis, IN 46207-7035 DO NOT WRITE IN THIS SPACE

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

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Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION . 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS 14765 Nest Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Falls, WI 53051 (414). 252-3550 11. US DOT IDENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 13. US EPA 7. NUMBER & TYPE OF 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) CONTAINER HAZARD CLASS (Enter number in box) Flammable F003 1. Solid 3. Mixture 2 38,000 5000 1 Tanker Waste Solwent N.O.S. NA 1993 Liquid 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) This is to certify that the information contained herein is true, accurate and complete and that the SHIPPED above named materials are properly classified, described, packaged, marked and tabeled and are in proper M D condition for transportation according to the applicable regulations of the U.S. Department of Transpor-Thomas A. Winters // / × / × tation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 32. FACILITY NAME 33. EPA IDENTIFICATION 19. EPA IDENTIFICATION ILD069506160 TIND016360265 Mr. Frank, Inc. American Chemical 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road 201 West 155th Street 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER 1214.701 1316 South Holland, Illinois 60473 Griffith, Indiana (312)-596-3377 23. COMMENTS 37. COMMENTS Inlanded in west 11-24-I hereby certify that the above named materials and indicated quantity (les) has (have) been I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted received and accepted. in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste-Facility. 39. NAME (Print) I hereby certify that the above famed materials and indicated quantity(ies) has (have) beer received and accepted. I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION designated as Hazardous Waste Facility. 27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number MIDIY Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management (800-424-8802) Outside Wisconsin Box 8094 FOR DNR USE ONLY Madison, Wisconsin 53707

# STATE OF WISCONSIN AND ARTHUR TO THE DEPARTMENT OF NATURAL RESOURCES

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

	MANIFEST	NOWREH
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GENERATOR (SHIPPE	R) SECTION	<del></del>		377	····				
1. COMPANY NAME	**************************************	1 H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2. EPA IDENT	IFICATIONNO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		7
Milwaukee So	olvents &	Chemicals 🗀	WIB0233	50192					
4. P.O. BOX OR STREE				,					
14765 W. Bot		nue							-
5. CITY, STATE, ZIP CO			6. TELEPHON	, , , , , , , , , , , , , , , , , , , ,	•				
Menomonee Fa	alls, WI 5:	3051	414-2	252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Ppunds
(1) Tanker	4500.0	Waste Sol	vent N.O.	S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	38,000
(2) 100,00	1000,0	8	· · · · · · · · · · · · · · · · · · ·	,				1	
		·	•				1. Solid 3. Mixture 2. Liquid		-
			K n .	**			1. Solid 3. Mixture	\	
This is to certify that the inf					15. AUTHORIZED SI	GNATURE	16. NAME (Print)	<u> </u>	17. DATE SHIPPED
above named materials are p condition for transportation					- 1 / 1 ·	77			MDY
tation and the Wis, Departm					1 Donatic	ald and in	Thomas A. Wi	nters	12/5/30
t	···					2000	<del></del>		
TRANSPORTER SECTI	ON				HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME			19.EPA IDENTI	FICATION	32. FACILITY NAM	ΛE.		33. EPA II NO.	DENTIFICATION
Mr. Frank I	nc.		TLD0695	06160	American	Chemical		IND	016360265
20. P.O. BOX OR STREET	ADDRESS	9.5			34. P.O. BOX OR 5	TREET ADDRESS			į.
201 West 155	th Street				420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO	DE		22. TELEPHON	ENUMBER	35. CITY, STATE,	ZIP CODE		36. TELE	HONE NUMBER
South Hollan	d, Illinoi	Ls 60473	(312)-5	96-3377	Griffith.	Indiana	بم بچم	219	1 4924-4370
23. COMMENTS				//	37. COMMENTS		· / */	Win Tana	+ + }
	(	j. A.	•		1. 1. 5		West 1.50	4000	T .
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		•				ナグリーノイー	720	ş-,.	
·	<u></u>								• • • • • •
I hereby certify that the abor- in proper condition for trans	ve named materials a	and indicated quantity	(les) has (have) be	en accepted	I hereby certify that	the above named ma	terials and indicated quanti	ty (les) has (hav	e) been
designated as Hazardous Was	te Facility.				38. AUTHORIZED	SONATURE	39. NAME (Print)	C 445	40. Date Accepted
24. YAUTHORIZED, SIGNA	TURE 25.	NAME (Print)	ul 7 126.0	ate Accepted	I hereby certify that	th pove named ma	terials and indicated quanti	ty(les) has (hav	12/5/50 e) been
I hereby certify that the aboutin proper condition for transdesignated as Hazardous Was	ve named materials a portation and I ackn te Facility.	and Indicated quantity	(ies) has (have) be shall be made to t	en accepted the facility	41. ALTERNATE H				DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTI NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y
29, AUTHORIZED SIGNA	TURE 30.	NAME (Print)		ate Accepted	46. MAIL TO: Department of N	latural Resources	47. Emergency 24 Hour A	ssistance Telepi (608-266-3232)	
The state of the s	<del></del>				Bureau of Solid	Waste Management		(800-424-8802)	
The state of the s			a it is	illa a ra ras	Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY		
HAZARDOUS WA	ASTE FACILIT	ΓY			4.	.[			

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A 14409
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MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION	·							
1. COMPANY NAME			2. EPA IDENTIFICATION NO	3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS			
Milwaukee Sol	•	hemicals	WID023350192			•			
4. P.O. BOX OR STREET		rt a	·			<i>&gt;</i> .		Ì	
5. CITY, STATE, ZIP CO		ue 	6. TELEPHONE NUMBER	_				]	
Menomonee Fal		051	(414) - 252-3550					·	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
(1) Tanker 5000 Waste Solvent N.O.S.			Flammable Liquid	NA1993	1. Solld 3. Mixture 2 2. Liquid	F003	:		
						1. Şolid 3. Mixture 2. Liquid			
	.4					1. Solid 3. Mixture 2. Liquid			
condition for transportation	roperly classified, de according to the app	scribed, packaged, ma dicable regulations of	e and complete and that the rked and labeled and are in prope the U.S. Department of Transpor onmental Protection Agency.	15. AUTHORIZED SI	GNATURE	Thomas A. Win	iters	17. DATE SHIPPED M D Y	
	. 3								
TRANSPORTER SECTION	ON			HAZARDOUS WA		SECTION			
18. COMPANY NAME			19.EPA IDENTIFICATION ILD069506160	32. FACILITY NAM		18. 19. 1		6360265	
Mr. Frank In		`}	177003200100	American			THUUT	0300203	
		-4	:						
201 West 155	otn Street		22. TELEPHONE NUMBER	35. CITY, STATE, Z	COLFAX RO	280	36. TELEP	HONE NUMBER	
South Hollan		s 60473	(312)-596-3377						
23. COMMENTS	,	200	322 330 3377	37. COMMENTS	2,0200	***			
		•	`			•			
		Contract of			4.	1			
		Al Lands		Pum pod	70 LUES'T	AGIT K	1/12/81	7-50	
		•					Jum 5	Murch	
I hereby certify that the above in proper condition for transdesignated as Hazartous Was	portation and Lackn	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that received and accepted 38. AUTHORIZED	the above named ma SIGNATURE	iterials and indicated quantl 39. NAME (Print)	<u></u>	e) been 10. Date Accepted	
24 AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted		IMM OF	b i		11/2/8/1	
Hay men	- 61	NRY DRUI:	TN 11 P218/	I hereby certify that received and accepted	he above named ma	torial and indicated quanti	ty(ies) has (have	e) been	
I hereby pertify that the above in proper condition for transposition as Hazardous Wasi	portation and Lackn	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H		E FACILITY NAME	42. EPA IC NO.	DENTIFICATION	
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management		ssistance Telept (608-266-3232) (800-424-8802)		
			. 2.	Box 8094 Madison, Wiscon		FOR DNR USE ONLY	(000.420008)		

# STATE OF WISCONSIN ... DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION									
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS				
Milwaukee So	-	hemicals	WID023350192	ا <b>ند</b> غ			•			
4. P.O. BOX OR STREE				₹						
14765 West B		enue								
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	÷						
Menomonee Pa	1112, 41 23	021	(414)-252-3550		T	<del></del>		<del></del>		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)		
(1) Tanker	5000	Waste Sol	lvent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	37,000		
						1. Solid 3. Mixture 2. Liquid				
		, JA.	,	-4		1. Solid 3. Mixture 2. Liquid				
This is to certify that the infabove named materials are pr			e and complete and that the rked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	. <b>6</b>	17. DATE SHIPPED M D Y		
condition for transportation	according to the app	licable regulations of	the U.S. Department of Transpor- onmental Protection Agency.	Lewise	withle	Thomas A. Wi	nters	1,11181		
TD ANDRODTED OF OTHER			· · · · · · · · · · · · · · · · · · ·			OF OTION!				
TRANSPORTER SECTI	UN	_1	19.EPA IDENTIFICATION	HAZARDOUS WA		SECTION	133. FPA II	DENTIFICATION		
Mr. Frank I	n C	•	ILD069506160	American			1 1 1 1 1 1 1	16360265		
20. P.O. BOX OR STREET			122003300100	34. P.O. BOX OR S			111001	10300203		
201 West 15	5th Street			420 South	Colfax Ro	ad				
21. CITY, STATE, ZIP CO		*	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		36. TELEF	PHONE NUMBER		
South Holla	nd. Illino	is 60473	(312)-596-3377	77 Griffith, Indiana (219'92						
23. COMMENTS				DT COMMENTE						
			•	70 EAS	T AGIT	TC - 1/27/81	1-50			
	-			70 EAST AGIT R - 1/27/81 1-50						
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	·			I hereby certify that the above named materials and indicated quantity(ies) has (have) been						
in proper condition for trans designated as Hazardous Was	portation and I ackn te Facility.	nd indicated quantity owledge that delivery	(les) has (have) been accepted shall be made to the facility	received and accepte 38. AUT TOTTIZED	S GNATURE	39. NAME (Print)	I A WAY TO	40. Date Accepted		
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26Date Accepted		LIME	- 1-18/A	11-11	7/2//>		
rapy Chlory		ICHEKL DIAM.		received and addepte	the above pamed ma d.		tyries his inev	o been		
I hereby certify that the aborin proper condition for trans designated as Hazardous Was	portation and Lackn	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	IAZARDOVS WAST	E FACILITY NAME	42. EPA IC NO.	DENTIFICATION		
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	. '	45. Date Accepted M / D / Y		
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted	46. MAIL TO:	****	47. Emergency 24 Hour A	ssistance Telept	hone Number		
			M / D / Y	Department of N	Natural Resources	In Wisconsin	(608-266-3232)	)		
	····			Bureau of Solid Box 8094	Waste Management		(800-424-8802)	· <del></del>		
			•	Madison, Wiscon	sin 53707	FOR DNR USE ONLY				

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# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

MAN	IIFEST NUMBER	
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Please type or print clear	iy using bali point	pen – press nara.				<u> </u>		
GENERATOR (SHIPPE	RI SECTION		<del></del>	· · · · · · · · · · · · · · · · · · ·				<del></del>
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
Milwaukee S	olvents &	Chemicals	WID023350192	*	•			
4. P.O. BOX OR STREE	T ADDRESS			<b>;%</b> *.				
14765 West	Bobolink A	Venue		<b>.</b>				
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	,		4		
Menomonee F	alls. WI 5	3051	(414)-252-3550					
		T	V1 232 3330	<del></del>	11. US DOT	T	1.0 550	1.4
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	. 9.	WASTE NAME	10. US DOT	IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
	Dia o							
(1) Tanker	(1) Tanker AR() Waste Solvent N.O.			Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	135,000
				<del></del>				<del></del>
						1. Solid 3. Mixture 2. Liquid	1	
<del></del>				-				†
					ĺ.	1. Solid 3. Mixture 2. Liquid		
This is to certify that the In				15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
			ked and labeled and are in proper the U.S. Department of Transpor-	<	and the same			W & Y
			onmental Protection Agency.	Little Collins		Thomas A. Wi	inters	13/1/////
				- 1 2 3 3 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1		
TRANSPORTER SECTI	ON			HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM				DENTIFICATION
Mr. Frank	k Inc.	·	NO. 1LD069506160	American	Chemical		TNDO	16360265
20. P.O. BOX OR STREET			122003300100	American	REET ADDRESS	<del></del>		
201 West	155th Stre	eet	1	ľ	h Colfax F	Road		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE, 2			36. TELEF	PHONE NUMBER
South Hol	lland Illi	inois 60473	(312-596-3377	Griffith, Indiana (219) 924-				
23. COMMENTS	22010, 222	11013 00473	312 330 3377			<del></del>		<u></u>
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I in proper condition for trans	sportation and I ackn	owledge that delivery	(les) has (have) been accepted shall be made to the facility	received and acquote	SIGNATURE	20. NONE (Dring)		40 Date Gerented
designated as Hazardous Was 24. AUTHORIZED SIGNA	•	NAME (Print)	, 26. Date Accepted,	38. 70	SIGNATURE	39. 112. (17)	1	A Day
and I find	/ }			I hereby celtify had		FLIN	TEGI	
1//12/12////		EXPEL MA		received and accepted		**	ity(les) ilas (llav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackn	nd indicated quantity owledge that delivery	ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZAMDOUS WAST	E FACILITY NAME	NO.	DENTIFICATION
27. 2nd. TRANSPORTER	•		28. EPA IDENTIFICATION	43, AUTHORIZED	SIGNATURE,	44. NAME (Print)	1.	45. Date Accepted
	*		NO.		73 w		1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted				<u></u>	
			M / D / Y	46. MAIL TO: Department of N	latural Resources	47. Emergency 24 Hour /	Assistance Telepl (608-266-3232)	
		· · · · · · · · · · · · · · · · · · ·		Bureau of Solid	Waste Management	Oùtside Wisconsin	(800-421-8802)	
			•	Box 8094 Madison, Wiscon	do 53707	FOR DNR USE ONLY		
				1412 G13011, 4415 COT	3111 33707 "			1 I

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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MANIFEST NUMBER

GENERATOR (SHIPPER) SECTION										
1. COMPANY NAME		·	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons				
Milwaukee So	lvents &	Chemicals	W100573201dg			A11				
4. P.O. BOX OR STREE						• • •				
14765 Nest B	obolink A	venue	_	•						
5. CITY, STATE, ZIP CO		<del></del>	6. TELEPHONE NUMBER			•	•			
Menomonee Fa	11s, WI 5	3051	(414) - 252-3550							
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)		
(1) Tanker 5000 Waste Solvent N.O.S.				Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	32,000		
						1. Solid 3. Mixture 2. Liquid				
						1. Solid 3. Mixture 2. Liquid				
condition for transportation	roperly classified, according to the a	described, packaged, ma pplicable regulations of	ked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	Thomas A. Win	nters	M D		
TRANSPORTER SECTI	011	<del>-</del>		HAZARDOUS WA	STE FACILITY	CCCTION		<del></del>		
18. COMPANY NAME	ON		19. EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. EPA 10	DENTIFICATION		
Mr. Enonte Inc	No.						NO.	6360265		
Mr. Frank Inc	ADDRESS		ILD069506160	American (	TREET ADDRESS	<del></del>		panuzna.		
201 West 155	•				Colfax Ro	ad		}		
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	35. CITY, STATE, 2			36. TELEF	HONE NUMBER		
South Holland	i, Illino	is 60473	( 312 596 - 3377	Griffity, Indiana (219) 924-4370						
23. COMMENTS	· •			37. COMMENTS	,	3/2/21		20		
11.00				To 20	03R 7-1	50 3/9/8/	Jim.	108		
	•									
in proper condition for trans	portation and Lac	s and indicated quantity knowledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.  38. AUTHORIZED SIGNATURE (7) 39. AIAME (Print) 7 7 4 40. Date Accepted						
designated as Hazardous Was 24. AUTHORIZED SIGNA	te Facility.	NAME (Print)	26. Date Accepted	38. AUTHORIZED	PRINTURE!	39. MAME (Print)	WIK	10. Date Accepted		
1///	11		M / D / Y/	Whereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.						
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.				41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION NO.						
27. 2nd. TRANSPORTER		·	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y		
29. AUTHORIZED SIGNA	ATURE 30	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	l .		
7				Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY				

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME . 2. EPA IDENTIFICATION NO.					3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Solvents & Chemicals WI			WID0233501	92	: A				
4. P.O. BOX OR STREE	T ADDRESS				•		-		
14765 West Bobo	olink Avenue								•
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE	NUMBER					
Menomonee Falls	s, WI 53051	}	( 414) - 25	2~3550	•				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5600	Waste Solve	nt N.O.S.	· ·	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	32000
							1. Solid 3. Mixture 2. Liquid		
				5-4-1 			1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf above named materials are p condition for transportation	roperly classified, de:	cribed, packaged, mar	ked and labeled and	are in proper	5. AUTHORIZED SI		16. NAME (Print)  Thomas A. Winter	res	17. DATE SHIPPED M D Y
tation and the Wis. Departm	ent of Natural Resou	rces or the U.S. Enviro	nmental Protection	Agency.	- Salar	1) Carrier	2.10,000		「フバネウル

HAZARDOUS WASTE MANIFEST FORM

Madison, Wisconsin 53707

Wisconsin Statutes 144

FORM 4400-66

TRANSPORTER SECTION		HAZARDOUS WASTE FACILITY SECTION	
18. COMPANY NAME	19. EPA IDENTIFICATION	32. FACILITY NAME	33. EPA IDENTIFICATION
Mr. Frank, Inc.	NO 11.0069506160	American Chemical	IND016360265
20. P.O. BOX OR STREET ADDRESS		34. P.O. BOX OR STREET ADDRESS	
201 West 155th Street	Í	420 South Colfax Road	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
South Holland, Illinois 60473	( 312)-596-3377	Griffith, Indiana	(219)-924-4370
23. COMMENTS		TO WEST ACITE	3/12/81 750
			Jom Munghy
I hereby certify that the above named materials and indicated of in proper condition, for transportation and i acknowledge that is designated as Hazardous Waste Facility.	uantity(les) has (have) been accepted delivery shall be made to the facility	I hereby certify that the above named materials and received and accepted.  38 AUTHORIZED SIGNATURE 39. NAM	
24. AUTHORIZED SIGNATURE 25. NAME (Print)	26. Date Accepted Mily D. J. Y-/	thereby certify that the above named materials and received and accepted.	MAUCK 3/92/8/ indicated quantity(ies) has (have) been
I hereby certify that the above named materials and indicated of in proper condition for transportation and I acknowledge that designated as Hazardous Waste Facility.	uantity(les) has (have) been accepted delivery shall be made to the facility	41. ALTERNATE HAZARDOUS WASTE FACILI	
27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.	43. AUTHORIZED SIGNATURE 44. NAM	1E (Print) 45. Date Accepted M / D / Y
29. AUTHORIZED SIGNATURE 30. NAME (Print)	31. Date Accepted M / D / Y	Department of Natural Resources In Wi Bureau of Solid Waste Management Outsi	gency 24 Hour Assistance Telephone Number sconsin (608-266-3232) de Wisconsin (800-424-8802)

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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MANIFEST NUMBER

See reverse side, Copy 6, for instructions.

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GENERATOR (SHIPPE	RI SECTION	······································						
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol		emicals	WID023350192		•			
4. P.O. BOX OR STREE		***************************************			والمجمعة			
14765 Bobolini		•					•	
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER					
Menononee Fall	ls, WI 530	51	(414-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
(1) Tanker	Z ''	Waste Sol	vent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	
				<u> </u>		1. Solid 3. Mixture 2. Liquid		
			<b>*</b>			1, Solid 3. Mixture 2.Liquid		
	roperly classifled, de according to the ap	escribed, packaged, mar plicable regulations of t	ked and labeled and are in proper the U.S. Department of Transpor-	15. AUTHORIZED SI	GNATURE	Thomas A. W.	inters	17. DATE SHIPPED
	· <del></del>	•	4	7	The state of the s		<del></del>	
TRANSPORTER SECTI	ON			HAZARDOUS WA	STE FACILITY	SECTION '		
18. COMPANY NAME	* :,		19. EPA IDENTIFICATION	32. FACILITY NAM	1E		33. EPA 10 NO.	DENTIFICATION
			ILD069506160	American	Chemical			6360265
20. P.O. BOX OR STREET	ADDRESS			34. P.O. BOX OR STREET ADDRESS				
201 West 155th				420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	35. CITY, STATE, Z	IP CODE		36. TELEF	HONE NUMBER
South Holland,	Illinois	60473	( 312) - 596 - 3377	Griffith.	Indiana	·	(219	924-4370
23. COMMENTS			2.00	27 COMMENTS		1		
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I hereby certify that the abo in proper condition for trans designated as Hazardous Was	nortation and Lackr	and indicated quantity(i nowledge that delivery s	es) has (have) been accepted hall be made to the facility	I hereby certify that received and accepted 38. AUTHORIZED	d.l\	terials and indicated quant 39. NAME (Print)		e) been 10. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted		ab lo 1	TOULT	-KE	3/2681
more X Normation michigan Deposition 12/10/			15 15/21/01 1	I hereby con y that	the above samed ma	terial and indicated alian	itylies) has (hav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackr te Facility.			41. ALTERNATE H	AZ ROOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M. 4 D / Y		latural Resources	47. Emergency 24 Hour /	Assistance Telept (608-266-3232)	
	<u></u>	<del></del>		Bureau of Solid \ Box 8094	Waste Management	Outside Wisconsin	(800-424-8802)	
			1	Madison, Wiscon	sin 53707	I OR DINK USE ONLY		1 1

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

MANIFEST NUMBER
A 14416

See reverse side, Copy 6, for instructions.

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GENERATOR (SHIPPE				<del></del>	<del></del>				
1. COMPANY NAME	11, 02011011		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .			
Milwaukee So:		Chemicals	WID023350192						
4. P.O. BOX OR STREET		venue			-				
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	-			•	•	
Menomonee Fal		3051	(414)-252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STA (Enter number in bo		13. US EPA VASTE CODE	14. SHIPPING WEIGHT (Pound
(1) Tanker	3200	Waste So	lvent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid		F003	\$7000
						1. Solid 3. Mixture 2. Liquid			
						1. Solid 3. Mixture 2. Liquid			
This is to certify that the inflabove named materials are pr			e and complete and that the rked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		<b>5</b>	17. DATE SHIPPED M D Y
condition for transportation	according to the a	opticable regulations of	the U.S. Department of Transpor- onmental Protection Agency.	11	Let of the second	Thomas A.	Wint	ers	4777
TRANSPORTER SECTION	ON			HAZARDOUS WA	STE FACILITY	SECTION			
18. COMPANY NAME	<u> </u>		19. EPA IDENTIFICATION	32. FACILITY NAM					DENTIFICATION
Mr. Frank. In	ic.		ILD069506160	American (	Themical			TND01	6360265
Mr. Frank, In	ADDRESS			American (	TREET ADDRESS				<u> </u>
201 West 155t	h Street			420 South	Colfar Ros	o đ			
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	420 South	IP CODE	2 (1		36. TELEF	PHONE NUMBER
South Holland	Illinoi	e 60473 -	(312 596-3377	Griffith,	Indiana	•		(210	924-437
23. COMMENTS	1111101	3 404/3 -	316 330-3377	37. COMMENTS	Indiana	<del> </del>		1 412	364-431
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in proper condition for transi	portation and I act	and indicated quantity mowledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that received and accepted	the above named m	terials and Indicated q 39. NAME (Print)	uantity	(les) has (hav	e) been
designated as Hazardous Was				38. AUTHORIZED	SIGNATURE	39. NAME (Print)	, ,	16	
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted		MAN	トンル	江山		4/9/81
Wind Known of		The Hart Myra		I hereby certify that received and accepted	<u> </u>	terials and indicated c	hamity		
designated as Hazardous Wast	te Facility.		(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME		42. EPA II	DENTIFICATION
27. 2nd. TRANSPORTER (	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44, NAME (Print)			45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management	47. Emergency 24 Ho In Wisconsin Outside Wisconsin	(6	08-266-3232	1
				Box 8094	-	FOR DNR USE ONL			

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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See reverse side, Copy 6, for instructions.		Wisconsin Statutes 14
Please type or print clearly using ball point pen - press hard.		FORM 4400-66

GENERATOR (SHIPPE	R) SECTION /	/						
1. COMPANY NAME	-*	/	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So		Chemicals (	WID023350192	Y				
4. P.O. BOX OR STREE				•				
14765 Mest B		renue				•		
5. CITY, STATE, ZIP CO	=		6. TELEPHONE NUMBER					
Menomonee Fa	11s, WI 53	3051	(414)-252-3550			·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5G16	Waste Sol	vent NgO.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	40.000
						1. Solid 3. Mixture 2. Líquid		
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This is to certify that the info			and complete and that the ked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
	according to the app	olicable regulations of t	he U.S. Department of Transpor-	The Na	and the Co	Thomas A. Wi	nters	5/27 1
						•		
TRANSPORTER SECTION	ONNO			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAME 33. EPA IDENTIFICATION				
Mr. Frank,	Inc.	l	ILD069506160	American	Chemical			6360265
20. P.O. BOX OR STREET	ADDRESS			34. P.O. BOX OR S	FREET ADDRESS			
201 West 1	55th Stree	t		420 Sout	h Colfax R	oad		
21. CITY, STATE, ZIP COI	DE		22. TELEPHONE NUMBER	35. CITY, STATE, 2	ZIP CODE , "		36. TELEF	HONE NUMBER
South Holls	and, Illin	ois 60473	(3121596-3377	Griffith	. Indiana		1219	924-4370
23. COMMENTS				37. COMMENTS		· · · · · · · · · · · · · · · · · · ·		
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I hereby certify that the above in proper condition for transposition and designated as Hazargous, Wast	portation and I ackr	and indicated quantity(	es) has (have) been accepted hall be made to the facility	Increby certify that received and accepte	the above named ma	terials and indicated quanti		e) been
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted		4 247	PODME	2/2	M 19718/
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1 January Contraction of the State of the St			les) has (have) been accepted	received and accepted	d. //			ENTIFICATION
designated as Hazardous Wast	portation and I ackn le Facility,	nowledge that delivery s	hall be made to the facility		··	E PACIEITY NAME	NO.	
27. 2nd. TRANSPORTER (	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	- ' '	Date Accepted  M / D / Y
						· .	L	*** / 5 / *
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted	46. MAIL TO:		47. Emergency 24 Hour A	ssistance Telept	none Number
$\int$	1		M / D / Y	Department of N	latural Resources	In Wisconsin	(608-266-3232)	٠
7	1			Bureau of Solid ' Box 8094	Waste Management		(800-424-8802)	
3 .	f i		•	Madison, Wiscon	sin 53707	FOR DNR USE ONLY	·	

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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GENERATOR (SHIPPE	R) SECTION	· ·				<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	vents & Cl	nemicals	WID023350192			•	•	
4. P.O. BOX OR STREE								
14765 West Bo	holink Ave	mua		•				
5. CITY, STATE, ZIP CO		mue	6. TELEPHONE NUMBER	•				
1 ' '			(414)- 252-3550					
Menomonee Fal	15, 11:530	731	(414/ 252-3550)	· · · · · · · · · · · · · · · · · · ·	I <del></del>	<del>,</del>	<del></del>	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
1	ĺ		~	Flammable		1. Solld 3. Mixture 2	ſ	!
(1) Tanker	5000	Waste Sol	vent N.O.S.	Liquid	NA1993	2. Liquid	F003	l .
		-				1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
				15. AUTHORIZED SI	GNATURE	16. NAME (Print)	٨.	17. DATE SHIPPED M, D Y
			narked and labeled and are in proper if the U.S. Department of Transpor-		- 1 · 1 · 1		-	
			ironmental Protection Agency.	James 1	Mutant	Terry Diet	rich	619 181
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TRANSPORTER SECTI	ON	<del></del>	<del>``</del>	HAZARDOUS WA	STE EACH ITY	SECTION	<del></del>	·····
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM		JECTION .	133. EPA II	DENTIFICATION
N= 771- 7			NO.				ÑO.	
Mr. Frank, I	NC.		LILD069506160	American (	Chemical	· · · · · · · · · · · · · · · · ·	LINDU	6360265
	•			<b>}</b>				
201 West 155	th Street			420 South	<u> Colfax Ro</u>	ad		
1			22. TELEPHONE NUMBER	35. CITY, STATE, 2	IP CODE		36. TELE	PHONE NUMBER
South Hollan	d, Illinoi	s 60473	(312) 596-3377	Griffith,	Indiana		219	924-4370
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I hereby certify that the abo	ve named materials	and indicated quantit	y(les) has (have) been accepted	I hereby certify that	the above named ma	terials and indicated quant	ity(ies) has (hav	re) been
in proper condition for trans designated as Hazardous Was	portation and Lacki	nowledge that deliver	y shall be made to the facility	38. ANTHORIZED	SIGNATURE	39. NAME (Print), +	<del>,, ,,,,</del>	40. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted			" DNIN C	15/5	18181
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11/4Kall /1/0		Tre HALL MAN		received and accepted	1. <b>6</b>	terials and indicated quanti		·
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and I acki	and indicated quantit nowledge that deliver	y (les) has (have) been accepted y shall be made to the facility	41. ALTERNATE H	3	E FACILITY NAME	42. EPA II	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTO ZED	SIGNATURE	44. NAME (Print)	/	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	)
	•	•	y · · · · · · · · · · · · · · · · · · ·	Box 8094	٠	FOR DNR USE ONLY	,	

HAZARD Wisconsin

Bureau of Solid Waste Management

Madison, Wisconsin 53707

Box 8094

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Statutes 144		A 299
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(800-424-8802)

Outside Wisconsin

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions. 01 FORM 44 Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals
4. P.O. BOX OR STREET ADDRESS WID023350192 14765 West Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Falls, WI 53051 414 252-3550 11. US DOT IDENTIFICATION NUMBER 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME CONTAINER (Enter number in box) WASTE CODE WEIGHT (Pounds) HAZARD CLASS Flammable 1. Solid 3. Mixture 2 5000 (1) Tanker 💹 Waste Solvent N.O.S. Liquid NA1993 F003 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid 16. NAME (Print) 17. DATE SHIPPED This is to certify that the information contained herein is true, accurate and complete and that the 15. AUTHORIZED SIGNATURE above named materials are properly classified, described, packaged, marked and labeled and are in proper м condition for transportation according to the applicable regulations of the U.S. Department of Transpor-Terry Dietrich C D3 KI tation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 32. FACILITY NAME 33, EPA IDENTIFICATION 19. EPA IDENTIFICATION Mr. Frank, Inc. ILD069506160 American Chemical IND016360265 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 201 West 155th Street 420 South Colfax Road 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER <sup>(</sup>312<sup>)</sup>596-3377 219<sup>)</sup> 924-4370 South Holland, Illinois 60473 Griffith, Indiana 23. COMMENTS 37. COMMENTS 10 203 423/81 T-50 9/m I hereby certify that the above named materials and indicated quantity (ies) has (have) been I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted received and accepted. in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted hereby certify that the above named materials and Indicated quantity(ies) has (have) been received and accepted I hereby certify that the above mimed materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION 27. 2nd, TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M / D /Department of Natural Resources In Wisconsin (608-266-3232)

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A 29902

MANIFEST NUMBER

See reverse side, Copy 6, for instructions.

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GENERATOR (SHIPPE	R) SECTION	<del></del>			<del>''</del>			
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	lvents &	Chemicals :	WID023350192	•		•		
4. P.O. BOX OR STREET				·	**.			
14765 West B	obolink A	venue			<i>&gt;</i> *			
5. CITY, STATE, ZIP CO		<b>-</b> •	6. TELEPHONE NUMBER					
Menomonee Fa	11s, W1 5	3051	414 1-252-3550	<del></del>	····	· •		T
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
(1) Tanker	4500	Waste Solve	ent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	F003	
		4				1. Solid 3. Mixture 2. Liquid		
		to the training			20	1. Solid 3. Mixture 2. Liquid		,
condition for transportation	roperty classified, de according to the ap	escribed, packaged, ma plicable regulations of	e and complete and that the rked and labeled and are in proper the U.S. Department of Transpor- onmental Protection Agency.	Tem D	GNATURE	Terry Dietric	ch	17. DATE SHIPPED M D Y
		_,	1	120.0		<del></del>		<del></del>
TRANSPORTER SECTION	ON "	-		HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME	,	* 1 <sub>20</sub>	19. EPA IDENTIFICATION	32. FACILITY NAM	ΛE.	,	33. EPA 10 NO.	DENTIFICATION
Mr. Frank, In	nc.		ILD069506160	American	Chemical	·.	INDO	6360265
20. P.O. BOX OR STREET				34. P.O. BOX OR 5	TREET ADDRESS			
201 West 155				420 South	Colfax Ro	ad		
			22. TELEPHONE NUMBER	35. CITY, STATE,			· .	HONE NUMBER
South Holland	d, Illinoi	s 60473	(312)596-3377	Griffith,	Indiana		210	<sup>)-</sup> 924-4370
	<b>, %</b> ,			1	1557 AC	T-50 g	2m 7/	7/81
I hereby certify that the above	ve named materials a	and indicated quantity	(ies) has (have) been accepted	I hereby certify, had received an accepte	the above named ma	terials and Indicated quanti	y(ies) has (hav	e) been
in proper condition for trans, designated as Hazardous Wasi	te Facility.	NAME (Print)	26. Date Accepted	38. AUTI OFFICED	SONATION	3. NAME (Print)		40 Date Ascended
Robert Ken	King K	obent to	RKINS 17/2/8/1	I hereby certify that	the above named ma	terials and indicated quantil	y(ies) has (hav	e) been
I hereby certify that the abovin proper condition for trans designated as Hazardous Wast	portation and I ackr	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility			E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER (	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted 'M / D / Y		Natural Resources Waste Management		sistance Teleph 608-266-3232) 800-424-8802)	
	•		-	Box 8094 Madison, Wiscon		FOR DNR USE ONLY		

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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GENERATOR (SHIPPE	R) SECTION	· -· · · · · · · · · · · · · · · · · ·					***************************************			
1. COMPANY NAME		- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-	2. EPA IDENTIF	ICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .			
Milwaukee So	olvents &	Chemicals	WID023350	0192		,				
14765 West Bobolink Avenue  5. CITY, STATE, ZIP CODE  6. TELEPHONE NUMBER						1				
5. CITY, STATE, ZIP CO	DODOTIIK 1	KACHUG	6. TELEPHONE	NUMBER			•			
Menomonee Falls, WI 53051 (414)-252-3550										
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		. WASTE NAME	13.3	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)	
(1) Tanker	5000	Waste Sol	vent N.O.S	<del></del>	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	F003	28000	
				٠	*		1. Solid 3. Mixture 2. Liquid			
							1. Solid 3. Mixture 2. Liquid			
This is to certify that the infabove named materials are p					5. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED	
condition for transportation tation and the Wis. Departm	according to the a	pplicable regulations of	the U.S. Departmen	nt of Transport	Every 1 1	Zuhal	Terry Dietr	ich	M/2 181	
					00					
TRANSPORTER SECTI	ON		<del></del>		HAZARDOUS WA		SECTION			
18. COMPANY NAME		•	19. EPA IDENTIF	ICATION	32. FACILITY NAM	· ·		l NO	DENTIFICATION	
Mr. Frank, In	ıc.		ILD069506	160	American (	Chemical		INDOI	6360265	
	•			.			_	19		
201 West 155t	h Street				420 South Colfax Road					
			22. TELEPHONE	178	35. CITY, STATE, ZIP CODE 36. TELEPHONE NU					
South Holland	l, Illinoi	is 60473	312 596	5-3377	Griffith, Indiana (219)924-43					
23. COMMENTS					37. COMMENTS	110 × 7-	.50 \$12/61	Jrm		
	·					Λ				
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	nortation and Lac	s and indicated quantity knowledge that delivery	(ies) has (have) been shall be made to th	n accepted e facility	I hereby carrify that received and accepted 38. AUTHORIZED	the above named ma	terials and indicated quant	tity (ies) has (hav	e) been 10: [t] te Accepted	
24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted					I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.					
1 hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and I ac	s and indicated quantity knowledge that delivery	(les) has (have) beer shall be made to th	n accepted e facility	41. ALTERNATE H				ENTIFICATION	
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIF NO.	TCATION	43. AUTHORIZED	SIGNATURE .	44. NAME (Print)		15. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	ATURE 30	. NAME (Print)	31. Da M /	te Accepted D / 🚝		latural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Telept (608-266-3232) (800-424-8802)		
					Box 8094 Madison, Wiscon	-	FOR DNR USE ONLY	, == 3,		

HAZARDOUS WASTE MANIFEST FORM 9-80

A 29909

See reverse side, Copy 6, for instructions.  Please type or print clearly using ball point pen — press hard.	Wisconsin Statutes 144 FORM 4400-66

GENERATOR (SHIPPE	R) SECTION						<u> </u>		
1. COMPANY NAME			2. EPA IDENTIFICATION		3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milan Are	-dverts	- ( hornice 15	W100083508	ا د					
4. P.O. BOX OR STREE		<u>-</u>							
14765 1165	1 Boke	1. in A	<b>C</b> ·						
5. CITY, STATE, ZIP CO	_ ,		6. TELEPHONE NUMBER					,	
Manicone nee	e 1-115	L.1.5305	1 (4141) 0 (2 355)						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11, US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Touker	5000	O Wasti Solver NOS.			Topical 1	NA 1-53	1, Solid 3, Mixture 2. Liquid	1003	35,000
					,		1. Solid 3. Mixture		
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf			and complete and that the ked and labeled and are in pro		5. AUTHORIZED SI	GNATURE	16. NAME (Print)	<b>6</b>	17. DATE SHIPPED
			he U.S. Department of Transp		7 1	$\sigma$ , $\delta$			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
tation and the Wis. Departm					any I L	1. June			1031 181
					() <del>(</del> /	······································	<u> </u>	<del></del>	
TRANSPORTER SECTI	ON.	<del></del>	<del></del>	¬ г	HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION		32. FACILITY NAM		SECTION	33. EPA 10	DENTIFICATION
18. COMPANY NAME  19. EPA IDENTIFICATION  70.  70.  70.  70.  70.  70.  70.  70					America		\	7,290 c	DENTIFICATION
20. P.O. BOX OR STREET	ADDRESS			<b>-1</b>  -	34. P.O. BOX OR \$7	REET ADDRESS			
21. CITY, STATE, ZIP CO	13516	511.		11	400 30		Frankling		
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	$\dashv$ $\vdash$	35. CITY, STATE, Z			36. TELER	HONE NUMBER
South 10,	1/20,6 1	11 60173	(2)2151/ 3	1 1	1 allin	11			11-1-4376
23. COMMENTS	1200	1. 6.67/31	1 1 1 7 3 7 1 3 3 3	· ( )			** 1		7777
23. COMMENTS				11	37. COMMENTS	•	1		
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				<b>⊣</b> ⊢	t hander marklift, that	<b>.</b>	T231274 1.14":124:12144 1.17.214		
I hereby certify that the about no proper condition for trans	ve named materials a portation and I ackr	ind indicated quantity(i lowledge that delivery s	es) has (have) been accepted hall be made to the facility		received and accepte		terials and indicated quant	ity (les) has (hav	
in proper condition for trans designated as Hazardous Was					38 / UTHORIZED	IGNATURE	32- NAME (PLIP)	<u> اسب</u>	Date Accepted
24 AUTHORIZED SIGNA		NAME (Print)	26. Date Accepte	<b>3</b>		Da)		<u></u> '	X 27 X 1
W- Nest	mu C	= WILDUS	N MAP BY		I hereby centify that it	he above named ma	terials and indicated quant	ity(ies) has (have	e) been
I hereby certify that the aboin proper condition for trans designated as Hazardous Was	portation and I ackn	and indicated quantity( lowledge that delivery s	ies) has (have) been accepted hall be made to the facility		41. ALTERNATE H		E FACILITY NAME	42. EPA IE NO.	DENTIFICATION
27. 2nd. TRANSPORTER	•		28. EPA IDENTIFICATION	→ ト	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del></del>	15. Date Accepted
			NO.						M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepte	╣┖			L	<del>-</del>	
			M / D / Y		46. MAIL TO: Department of N	atural Resources	47. Emergency 24 Hour A In Wisconsin	(ssistance Teleph (608-266-3232)	
<del></del>	····					Vaste Management	Outside Wisconsin	(800-424-8802)	
					Box 8094 Madison, Wiscon	in 53707	FOR DNR USE ONLY		
•					1914013011, 99130011	m 33707			1 1

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER	
A 29910	

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

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GENERATOR (SHIPPE	R) SECTION					~			
1. COMPANY NAME		3. COMMENTS/SPE	CIAL INSTRUCTIO	NS					
Milwaukee So	lvents 8 C	hemicals	WIDO23350192						
	4. P.O. BOX OR STREET ADDRESS								
14765 West B	obolink Av	enue				4.0			
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUMBER	1					
Menomonee Fa	11s, WI 53	051	(414)-252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
(1) Tanker	5000	Waste Solv	ent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	38 100	
				:		1. Solid 3. Mixture 2. Liquid			
						1. Solid 3. Mixture 2. Liquid			
condition for transportation	roperly classified, de according to the app	scribed, packaged, mar olicable regulations of I	and complete and that the ked and labeled and are in proper the U.S. Department of Transpor- commental Protection Agency.	15. AUTHORIZED SI	GNATURE	16: NAME (Print) Terry Dietric	:h	17. DATE SHIPPED M D Y	
ŕ	-			1///	<del></del>	· · · · · · · · · · · · · · · · · · ·			
TRANSPORTER SECTI	ON .		<del></del>	HAZARDOUS WA	ASTE FACILITY	SECTION	·····		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAN	1E	** ; ** **	33. EPA 10 NO.	DENTIFICATION	
Mr. Frank, In	nc.		ILD069506160	American	Chemica1			6360265	
20. P.O. BOX OR STREET	ADDRESS		?	34. P.O. BOX OR S	TREET ADDRESS				
201 West 155	th Street	•		420 South	Colfax Ro	nd•			
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER					
_ South Holland	d. Illinoi:	s 60473	(312)596-3377	Griffith, Indiana (219) 924-				924-4370	
23. COMMENTS				37. COMMENTS					
•				70 2	10 x 7-	50 8/24/21	am		
				/ -/	, ,	50 8/24/81	<i>y)                                    </i>		
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				}	٨				
I hereby certify that the abo	ve named materials a	ind indicated quantity(	ies) has (have) been accepted	I hereby certify that	the bove named ma	terials and indicated quantil	y(ies) has (hav	e) been .	
in proper condition for trans designated as Hazardous Was	te Facility.	lowledge that delivery	shall be made to the facility	38. AUT OF IZED	SCHATTE	39 NAME (Print)	/	0. Date Accepted	
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	1 June		TINNEL	1	77111-18	
Hart Laure	ORY DRUCA	I hereby/certify that	the above named ma	terials and indicated quantit	y(ies) has (hav	e) been i			
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackn te Facility.	nd indicated quantity( lowledge that delivery	ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H				DENTIFICATION	
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources		608-266-3232)		
,				Bureau of Solid 'Box 8094	Waste Management		800-424-8802)		
•				Madison, Wiscon	sin 53707	FOR DNR USE ONLY			

See reverse side, Copy 6, for instructions.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

A 29912

Please type or print clear	ly using ball point	pen - press hard.	FC		1400-66 :::	9-80	[/]	<u> </u>	•
GENERATOR (SHIPPE	R) SECTION	•							
1. COMPANY NAME	T ADDRESS	Chiera	WINDOWS SOIS		3. COMMENTS/SPE	CIAL INSTRUCTIO	N5		
5. CITY, STATE, ZIP CO	Moledi-	· · · · · · · · · · · · · · · · · · ·	6. TELEPHONE NUMBER		; -			•	:
Miss mire	F-115 11,	53051	V14 1363-365	<u>''</u>	· · · · · · · · · · · · · · · · · · ·	4		<u>.,</u>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
1 the	5000	110540	Solvini NOS		1.5	NA1513	1. Solid 3. Mixture 2. Liquid	1.03	26000
01							1. Solid 3. Mixture 2. Liquid		
0					<u> </u> :		1. Solid 3. Mixture 2. Liquid		
above mamed materials are p condition for transportation	roperly classified, de according to the app	escribed, packaged, m plicable regulations o	ite and complete and that the narked and labeled and are in pro I the U.S. Department of Transp	per	S. AUTHORIZED SI	GNATURE	16. NAME (Print)	<b>6</b>	17. DATE SHIPPED M D Y
tation and the Wis. Departm	ent of Natural Resou	arces or the U.S. Env	ironmental Protection Agency.		1000 () 1/11	*	Marriaga Ruch Ko	<u> </u>	
TRANSPORTER SECTI	ON			٦ [	HAZARDOUS WA	ASTE FACILITY	SECTION	<del></del>	<del> </del>
18. COMPANY NAME	J		19. EPA IDENTIFICATION 7.4.00 5.4.4.4.4.4.6.0		132. FACILITY NAN	1E .	a	33. EPA IC	DENTIFICATION
20. P.O. BOX OR STREET	ADDRESS	517	1		.34. P.O. BOX OR S			- 4	m selling.
21. CITY, STATE, ZIP CO	DE 1 7/1	5 80473	22. TELEPHONE NUMBER		35. CITY, STATE,	ZIP CODE			HONE NUMBER
23. COMMENTS			(		37. COMMENTS	wहडा 211 <sup>-</sup>	R 8/27/81	uesk	
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I hereby certify that the abo	ve named materials a portation and I ackn	and indicated quantit	y(les) has (have) been accepted y shall be made to the facility	<b>-</b>	I hereby certify that received and accepted 38. gd THGRIZED	the above named ma	terials and indicated quant	· · · · · ·	·
24 AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	_	I hereby certify that received and acceptes	A 170 m	39, NAME (Print) Lerials and indicated quant	FIC	Date Accepted,
I hereby certify that the aborin proper condition for trans designated as Hazardous Was	portation and Lackn	ind indicated quantit	y(les) has (have) been accepted y shall be made to the facility	-	41. ALTERNATE H		E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME	,	28. EPA IDENTIFICATION NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)		Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y			latural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Teleph (608-266-3232) (800-424-8802)	
	<b>15</b>		and the second s	¥2 }	Box 8094 Madison, Wiscon	, [	FOR DNR USE ONLY	•	

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

A 20012

47, Emergency 24 Hour Assistance Telephone Number

(608-266-3232)

(800-424-8802)

In Wisconsin

FOR DNR USE ONLY

Outside Wisconsin

MANIFEST NUMBER

Please type or print clearly using ball point pen — press hard.					4400-66	9-80	[/	( 23310	<u>,                                    </u>			
GENERATOR (SHIPPE	R) SECTION			<u> </u>			:					
1. COMPANY NAME			2. EPA IDENTIFIC	ATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS					
Milwaukee Sol	vents & C	hemicals	WID023350	192		r	$S_i \pi^{ij}$					
14765 West Bo		•	•		•	i			į			
5. CITY, STATE, ZIP CO		enue	6. TELEPHONE NU	JMBER	•	•						
Menomonee FA1	ls. WI 53	051	414 1.252	-3550			<b>"</b> "					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS							10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE		14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solve	ent N.O.S.		Flammable Liquid		1. Solid 3. Mixture 2	] <sub>F003</sub>	37,000			
			•		•		1. Solid 3. Mixture	]				
						•	1. Solid 3. Mixture	]				
This is to certify that the initiabove named materials are p condition for transportation tation and the Wis.; Qeparty	properly classified, d according to the ap	escribed, packaged, ma policable regulations of	rked and labeled and a the U.S. Department o	re in proper of Transpor(	15. AUTHORIZED SI	anature.	16. NAME (Print) Terry Di	etrich	17. DATE SHIPPED M D Y			
			198		·				- 'She			
TRANSPORTER SECTI	ON	<u> </u>			HAZARDOUS WA		SECTION					
18. COMPANY NAME  Mr. Frank.  20. P.O. BOX OR STREET	Inc.		19. EPA IDENTIFICA NO. ILDO695061		American	Chemica1		NO.	360265			
20. P.O. BOX OR STREET	T ADDRESS				34. P.O. BOX OR ST	REET ADDRESS						
201 Nest 15	5th Street	t	A.			Colfax Ro	ad	<del></del>				
			22. TELEPHONE NU	I .	35. CITY, STATE, Z			ı	PHONE NUMBER			
South Holla 23. COMMENTS	nd, Illine	ois 60473	(312)596-	- 3377	Griffith,	Indiana		219	9-924-4370			
			्रों % १. क		70 2	211 R 7-1	50 8/31/81 (	Sul				
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·		<u> </u>			:							
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	sportation and Lack	and indicated quantity nowledge that delivery	r(les) has (have) been a r shall be made to the f	ccepted acility	I hereby certify that received and accepted 38 NUTTIORIZED	Us above named ma	terials and indicated quai	ntity(ies) has (hav	e) been O Day Account			
24: AUTHORIZED SIGNA		NAME (Print) ARY DRUE	26. Date /		I he oby certify that t	the above named ma	terials and indicated quar	ntity(ies) has (hav	DM P9 MY			
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials sportation and I ack ste Facility	and indicated quantity nowledge that delivery	(ies) has (have) been ac shall be made to the fa	ccepted acility	41. ALTERNALE H	AZARDOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION			
27. 2nd. TRANSPORTER			28. EPA IDENTIFICA		43. AUTHORIZED S	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y			
29. AUTHORIZED SIGNA	ATURE   30.	NAME (Print)	31. Date, /	Accepted		·	<u></u>	<u>_</u>				

46. MAIL TO:

Box 8094

Department of Natural Resources

Madison, Wisconsin 53707

Bureau of Solid Waste Management

M/D/Y

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

MAN	IIFEST NUMBER
Α	29914

Please type or print clear!	y using ball poin	t pen — press hard.			, , ,				
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION NO	. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .			
HILWAUKEE SOL	VENTS & CI	IEMICALS	WID023350192	- *					
4. P.O. BOX OR STREE	T ADDRESS	ĩ		1			ı		
14765 WEST BO	BOĹINK AVE	NUE '					· <b>T</b>	Ä.	
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER	1				4.	
HENOMONEE FAL	ENOMONEE FALLS, WI 53051 (414)-252-3550								
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)	
(1) TANKER	5000	WASTE SOLV	ENT N.O.S.	FLAMMABLE LIQUID	NA1993	1. Solid 3. Mixture 2. Liquid	F003	35 000	
						1. Solid 3. Mixture 2. Liquid	]		
<b>.</b>						1. Solid 3. Mixture 2. Liquid	]		
This is to certify that the infa above named materials are pi condition for transportation	conerly classified d	etcribed packaged ma	e and complete and that the rked and labeled and are in prope the U.S. Department of Transpor	15. AUTHORIZED SI	GNATURE /	16. NAME (Print)	, b	17. DATE SHIPPED M D Y	
tation and the Wis. Departme	ent of Natural Reso	urces or the U.S. Envir	onmental Protection Agency.	Leny 11	Lietmal	TERRY DIET	RICH	913111	
TRANSPORTER SECTION	ON			HAZARDOUS WA		SECTION			
18. COMPANY NAME			19. EPA IDENTIFICATION NO.	32. FACILITY NAM	IE .		33. EPA IDENTIFICATION NO.		
MR. FRANK INC	`		TLD069506160	AMERICAN	CHEMICAL		INDO1	6360265	
			ļ	34. P.O. BOX OR \$1	REET ADDRESS				
201 WEST 155TE	STREET	<del></del>		420 SOUTE	COLPAX R	OAD	126 TELES	HONE NUMBER	
•			22. TELEPHONE NUMBER					,	
SOUTH HOLLAND,	ILLINOIS	60473	(312)-596-3377	GRIFFITH.	INDIANA	<del> </del>	<u>'219</u>	924-4370	
					Q112 7-5	50 9/3/81 gr	المير)	•	
p. 3	,	•							
I hereby cartify that the above in proper candition for trans- designated as Hazardous Wast	portation and Lack	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	Thereby certify that received and accepted 38. AUTHORIZED	the above named ma 1. SIGNATURE	iterials and Indicated qual	ntity(les) has (hav	e) been	
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	$  \wedge   \sim \mathcal{U} \mathcal{F}_{\mathcal{I}}$	MIAS	terial and indicated quar	ntity(ies) has (hav	Z <sup>n</sup> / S / S / P   Deeth	
I hereby ertify that the above in proper condition for trans- designated as Hazardous Wasi	portation and tack	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION	
27. 2nd. TRANSPORTER (			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y	
29. AUTHORIZED SJGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Naste Management	47. Emergency 24 Hour In Wisconsin Outside Wisconsin	Assistance Telepi (608-266-3232) (800-424-8802)	)	
				Box 8094 Madison, Wiscon	•	FOR DNR USE ONLY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

ΙA	29917

MANIFEST NUMBER

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPE	R) SECTION					,		
1. COMPANY NAME		78,7	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS		
Milwaukee Sol	vents & C	hemicals 🦳	WIDO23350192		•			
4. P.O. BOX OR STREE	T ADDRESS		_ <del></del>		•			
14765 West Bo	bolink Av	enue						
5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER				•		<b>,</b>		
Menomonee Fal	ls, WI 53	051	414 1-252-3550			: :		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Sol	vent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	37,000
		- <del></del>				1. Solid 3. Mixture 2. Liquid		
			• .			1. Solid 3. Mixture 2. Liquid		
above named materials are p condition for transportation	properly classified, d according to the ag	lescribed, packaged, m oplicable regulations o	ate and complete and that the narked and labeled and are in proper I the U.S. Department of Transpor ironmental Protection Agency.	Jenny !!	GNATURE Les	Terry J Det	V	17. DATE SHIPPED M D Y 11/5 /}
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TRANSPORTER SECTI	ON			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME 19.EPA IDENTIFICATION NO.				32. FACILITY NAM	/E	, , , , , , , , , , , , , , , , , , , ,	33. EPA IC	ENTIFICATION
Mr. Frank, Inc. ILD069506160			American	Chemical			6360265	
20. P.O. BOX OR STREE	ADDRESS			34. P.O. BOX OR S	TREET ADDRESS	4.		·
201 West 155	th Street			420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO	DE	HPT.	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		36. TELEP	HONE NUMBER
South Hollan	d. Illinoi	is 60473	(312)596-3377	Griffith, Indiana (219) 924-4370				
23. COMMENTS				37. COMMENTS		11 0		
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t hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lack	and indicated quantit mowledge that deliver	y(ies) has (have) been accepted y shall be made to the facility	Thereby certify the received accepted 38. AVIVORIZE D	the above named made. SIMPATURE	aterials and indicated quanti	ty (les) has (hav	e) been 10. Dela Arcopyd
24 LAWTHIRIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	YMMAY		IN DOIN FE	<b>ب</b> ب	1M710 28 Y
theles	11. C	C WILB	30N 19 79 71	I hereby certify that received and accepte	ne above named ma	terials and indicated quanti	ty(ies) has (have	e) been
I hereby certify that the abo In proper condition for trans designated as Hazardous Was	portation and I ack	and indicated quantit nowledge that deliver	y(les) has (have) been accepted y shall be made to the facility			E FACILITY NAME	42. EPA IC NO.	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME	···	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Telept (608-266-3232) (800-424-8802)	
				Box 8094 Madison, Wiscor	•	FOR DNR USE ONLY	(000-424-6602)	

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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Α	29918	

MANIFEST NUMBER

Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 3. COMMENTS/SPECIAL INSTRUCTIONS 2. EPA IDENTIFICATION NO. Milwaukee Solvents & Chemicals
4. P.O. BOX OR STREET ADDRESS WID023350192 14765 West Bobolink Avenue
5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER ( 414)·252-3550 Menomonee Falls. WI 53051 11. US DOT IDENTIFICATION NUMBER 7. NUMBER & TYPE OF 13. US EPA 14. SHIPPING 10. US DOT 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) CONTAINER HAZARD CLASS (Enter number in box) Flammable 1. Solid 3. Mixture 2 5000 75000 F003 (1) Tanker Waste Solvent N.O.S. Liquid NA1993 2. Liquid 1. Solid 3. Mixture

1	•	2. Liquid	
		1. Solid 3. Mixture	
condition for transportation according to the application	rein is true, accurate and complete and that the ribed, packaged, marked and labeled and are in proper cable regulations of the U.S. Department of Transpor- ies or the U.S. Environmental Protection Agency		D <sub>Y</sub>
	<u> </u>		
TRANSPORTER SECTION	A CONTRACTOR	HAZARDOUS WASTE FACILITY SECTION	
18. COMPANY NAME	19. EPA IDENTIFICATION A	33. EPA IDENTIFICATI	ION
Mr. Frank. Inc. 20. P.O. BOX OR STREET ADDRESS	ILD069506160 E	American Chemical INDO1636026	5
201 West 155th Street	•	420 South Colfax Road	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMB	BER
South Holland, Illinois	60473 312 596-3377	Griffith, Indiana (219'924-4:	<u>37</u>
· :		70 21/2 7-50 9/25/81 gran	
I hereby certify that the above named materials and in proper condition for transportation and I acknow	f indicated quantity(les) has (have) been accepted wiedge that delivery shall be made to the facility	Thereby (cytify that the bove named materials and indicated quantity(ies) has (have) been received and accepted.	
designated as Mazardous Waste Facility.	AME (Print)  Control	38. AUT (GRIZE DISIDINATURE)  1 hereby catility that the hove named materials and indicated quantity (ies) has (have) been received and accepted.	8
I hereby certify that the above named materials and in proper condition for transportation and I acknow designated as Hazardous Waste Facility.	d indicated quantity(ies) has (have) been accepted wledge that delivery shall be made to the facility	41. ALTERNATE HAZ ROOUS WASTE FACILITY NAME 42. EPA IDENTIFICATI	ION
27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.	43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accept M / D /	
29. AUTHORIZED SIGNATURE 30. N.	AME (Print)  31. Date Accepted  M / D / Y	46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802)	
• •		Box 8094 Madison, Wisconsin 53707 FOR DNR USE ONLY	

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION				· · · · · · · · · · · · · · · · · · ·			* 1987 ·
1. COMPANY NAME		A	2. EPA IDENTIFICATION NO	3 COMMENTS/SPE	CIAL INSTRUCTIO	NS .,4		15
Milwaukee Sol	vents & Cl	nemicals	WID023350192		21. 	- <b>*</b>	• • .	tus.
14765 West Bo	·		6. TELEPHONE NUMBER	-		e e e	· .	. •
Menomonee Falls, WI 53051 414 252-3550								
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	, 9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solve	ent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	25,000
						1. Solid 3. Mixture 2. Liquid		
·				,		1. Solid 3. Mixture 2. Liquid		
	roperly classified, de according to the app	escribed, packaged, mar ollcable regulations of t	ked and labeled and are in proper he U.S. Department of Transpor-	15. AUTHORIZED SI	Autor h	Terry Dietri	<b>c</b> h	17. DATE SHIPPED M D .Y
			<del>~</del>	111				
TRANSPORTER SECTI	ON		19.EPA IDENTIFICATION	HAZARDOUS WA		SECTION		
18. COMPANY NAME		32. FACILITY NAM				ENTIFICATION		
Mr. Frank, Inc. ILW069506160				American C			INDOI	.6360265
20. P.O. BOX OR STREET		4		34. P.O. BOX OR S		•	-	
201 West 155t				420 South		d		i
21. CITY, STATE, ZIP CO		·	22. TELEPHONE NUMBER	35. CITY, STATE, 2				HONE NUMBER
South Holland	, Illinois	60473	012 ) 596-3377	Griffith, Indiana 219 )924-437				
23. COMMENTS				37. COMMENTS 70 2/	1R 7-5	50 9/17/81	mich	
						· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lacke	ind indicated quantity( lowledge that delivery	ies) has (have) been accepted shall be made to the facility	I hereby cortily that received and accepted 38. AUT/ICRIZED	d	terials and indicated quanti		P. Date Accepted
RAL AUTHORIZED SIGNAL		NAME (Print)	25. Date Accepted	1 1/sh	upel	1 1 1	SE	1™1981\
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackn te Facility.	nd Indicated quantity( lowledge that delivery	ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H				ENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Teleph (608-266-3232) (800-424-8802)	one Number
4.	544 S	•	in the second se	Box 8094 Madison, Wiscon	-	FOR DNR USE ONLY		

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#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 9-80 FORM 4400-66

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MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION	· · · · · · · · · · · · · · · · · · ·							
1. COMPANY NAME	,		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	INS			
Milwaukee Sol	vents & C	nemicals	WID023350192	(111)	(bungle	nc For	and the con	i (in <u>i</u>	
14765 West Bo	14765 West Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER				700-40	414300		*: <u></u>	
Menomonee FA1	Menomonee FAlls, WI 53051 (414) 252-3550								
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
(1) Tanker	4500	Waste Solv	ent N.O.S.	Flammable Liquid	UN1993	1. Solld 3. Mixture 2	F003	3,000	
						1. Solid 3. Mixture 2. Liquid			
						1. Solid 3. Mixture 2. Liquid	A		
above named materials are p condition for transportation	roperly classified, de according to the sp ent of Natural Reso	escribed, packaged, ma plicable regulations of urces or the-U.S. Envir	e and complete and that the irked and labeled and are in proper the U.S. Department of Transpor- onmental Protection Agency.	15. AUTHORIZED S	GNATURE	Terry Dietr	ich	17. DATE SHIPPED M D Y	
57	A+	· -	J	()	1				
TRANSPORTER SECTI	ON .		7		ASTE FACILITY	SECTION			
18. COMPANY NAME	,		19.EPA IDENTIFICATION NO.	32. FACILITY NAM	ME .		33. EPA 10 NO.	DENTIFICATION	
Mr. Frank. In	C.		ILD069506160	American Chemical INDO16360265					
	•			420 South Colfax Road					
201 West 155t	u Street.		22. TELEPHONE NUMBER	35. CITY. STATE, ZIP CODE 36. TELEPHONE NUMBER					
South Holland	Lilitrois	60473	(312) 596-3377	Griffith, Indiana			219 924-4370		
23. COMMENTS	1.			37. COMMENTS		1 )			
				To 21	10x 7-50	9/22/8/ Drm			
			1					-	
I hereby certify that the aborin proper condition for trans	ve named materials	and indicated quantity	(ies) has (have) been accepted	I received add actente	a #46 \$	terials and Indicated quantil	ty(ies) has (hav	e) been	
designated as Hazardous Was	te Facility.	NAME (Print)	26. Date Accepted	38. AUTURIZED	SIGNATURE	39. TYAME (Print)	17-4	O-Date Accepted	
1) 11/1/20		NH LI/11/13	12	I hereby certify that received and accepte	the above named ma	terials and indicated quintit	y(ies) has (have		
Thereby certify that the about in proper condition for trans designated as Hazardous Was	portation and I ackr	and indicated quantity	(jes) has (have) been accepted			E FACILITY NAME	42. EPA IC NO.	DENTIFICATION	
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	15. Date Accepted	

31. Date Accepted

M / D /. Y

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) (800-424-8802) Outside Wisconsin

FOR DNR USE ONLY

45. Date Accepted M / D / Y

30. NAME (Print)

29. AUTHORIZED SIGNATURE

See reverse side, Copy 6, for instructions.

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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GENERATOR (SHIPPE	R) SECTION	_							
1. COMPANY NAME		<u> </u>	2. EPA IDE	NTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
4. P.O. BOX OR STREE	DIVENTS +	Chemicals	N1009	3350192					
14765 Ulas		sink the							
Min strate, zip co		: 53051		JG -3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		WASTE NAM	ΛE.	10. US DOT HAZARO CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanter	5000	Waste S	duent	N.05	Monnible 11711	Un1493	1. Solld 3. Mixture 2. Liquid	FUUS	35,000
					· ·		1. Solid 3. Mixture 2. Liquid		
				<i>i</i> .			1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf above named materials are p condition for transportation tation and the Wis. Departm	roperly classified, de according to the app	scribed, packaged, ma dicable regulations of	rked and labele the U.S. Depar	ed and are in proper timent of Transpor	Teny of	ichr)	Terry 1 0	etrol	17. DATE SHIPPED M D Y
r==					0				· <del></del>
TRANSPORTER SECTI					HAZARDOUS WA		SECTION		
Mr Fank tue 19. EPA IDENTIFICATION					32. FACILITY NAM	( Louni ca		7,770 O	1636096)
20. P.O. BOX OR STREET	ADDRESS TH	Street		3.	34. P.O. BOX OR ST	A LA (O)	^ X		
Soul Holl		. 60473		.596-33)	35_ CITY, STATE, ZIP CODE TO JOHN JOHN JOHN JOHN JOHN JOHN JOHN JOH				
23. COMMENTS					37. COMMENTS				
					To 2/0	ote 9/25/8	7-50 gr	m.	
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	•				1 1 1	•			
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackn	nd indicated quantity owledge that delivery	(ies) has (have) shall be made	been accepted to the facility	I hereby certify that received and discotts 38. AUTHO FIRED	the above named ma 1. SIGNATURE	terials and indicated quanti	ty(les) has (hav	e) been  O. Date Accepted
24 TAUTHORIZED SIGNA	TURE 25.	NAME (Print)		M / D / Y	I hereby certily full received and accepted	the bove named ma	tenals and indicated quanti	ty(ies) has (hav	1 24/8/
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackn	nd indicated quantity	(ies) has (have)	been accepted to the facility	41. ALTERNATE H				DENTIFICATION
27. 2nd. TRANSPORTER COMPANY NAME  28. EPA IDENTIFICATION NO.			NTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)		1. Date Accepted M / D / Y		latural Resources Waste Management		ssistance Telepl (608-266-3232) (800-424-8802)	1
					Box 8094 Madison, Wiscon	_	FOR DNR USE ONLY		

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#### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

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GENERATOR (SHIPPE	R) SECTION	<del></del>							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTION	Divis			
Miluse have	Location		U100033350153			•	•		
4. P.O. BOX OR STREE	T ADDRESS	<del></del>		M		I = 0		Ì	
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5. CITY, STATE, ZIP CO	DOE	<del> </del>	6. TELEPHONE NUMBER						
Minsminnes 1	I.IIS		1919 1-350 3550					l	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
1 To her	5000	Charle Sol	um 1105	61616	CAN 1553	1. Solid 3. Mixture 2. Liquid	$r\omega$ $s$	14,ano	
			·			1. Solid 3. Mixture 2. Liquid			
		·				1. Solid 3. Mixture 2. Liquid	<u> </u>		
condition for transportation	roperly classified according to the	, described, packaged, ma applicable regulations of	te and complete and that the arked and labeled and are in proper the U.S. Department of Transpor- ronmental Protection Agency	Tim, Ile	: Link	16. NAME (Print)	, i /	17. DATE SHIPPED M D Y	
TRANSPORTER SECTI	·			/ V	A OTE EA OUL ITY	OF OTION	<del></del>		
TRANSPORTER SECTION 18. COMPANY NAME		HAZARDOUS WA		SECTION	133 500 11	DENTIFICATION			
18. COMPANY NAME  19. EPA IDENTIFICATION  NO  TLO  TL				America		1	NO,	16 6 115	
20. P.O. BOX OR STREET ADDRESS				34. P.O. BOX OR S	TREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	11000	, ,	
201 Crst	155 46	Street		1180 SOK					
21. CITY, STATE, ZIP CO	DE	4 (04)3	22. TELEPHONE NUMBER ( 3/2) -54/- 33))	35. CITY, STATE, ZIP CODE  (17) 1612					
23. COMMENTS			***************************************	37. COMMENTS	<del></del>				
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I hereby certify that the above	ve named materia	Is and indicated quantity	v(ies) has (have) been accepted	I hereby certify that	the bove namedima	aterials and indicated quanti	ty(les) has (hav	e) been	
in proper condition for trans designated as Hazardous Was	portation and La	cknowledge that delivery	shall be made to the facility	received and accepted 38. AUTHORUNED	SIGNATURE /	39 NAME (Print)		49. Qate-Accepted	
AUTHORIZED SIGNA		5. NAME (Print)	26. Date Accepted	I hereby cediff that received and accepto	WALL S	aterials and indicated quanti	ty(ies) has (hav	(M) 2/8/	
I hereby certify that the about in proper condition for trans designated as Hazardous Was	portation and La	Is and indicated quantity	(ies) has (have) been accepted shall be made to the facility			E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION	
27. 2nd. TRANSPORTER		E	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 3	0. NAME (Print)	31. Date Accepted M / D / Y		Natural Resources		(608-266-3232)	1	
			4	Box 8094 Madison, Wiscon	Waste Management	FOR DNR USE ONLY	(800-421-8802)		

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

9-80

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GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	vents & Ch	emica1s	WI 8023350192			.1 <sup>-</sup> .		
4. P.O. BOX OR STREE	T ADDRESS					***	-	
14765 West Bobolink Avenue					•	Re-	,	
5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER				•	**			
Menomonee Falls, WI 53051 414 252-3550					·	<del></del>		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Sol	lvent N.O.S.	Flammable Liquid	UN1993	1. Solld 3. Mixture 2	tous	36000
3:		. 24				1. Solid #3: Mixture 2. Liquid		
·		<sup>te</sup> Um.	خر			1. Solid 3. Mixture 2. Liquid		
condition for transportation	roperly classified, des according to the appi	cribed, packaged, ma icable regulations of	e and complete and that the rked and labeled and are in proper the U.S. Department of Transpord onmental Protection Agency.	Tony Dehi	GNATURE	Terry Dietri	ch	17. DATE SHIPPED M D Y
\$	ν,	4			.1			
TRANSPORTER SECTI	ON	- <u>4</u>	19. EPA IDENTIFICATION	HAZARDOUS W		SECTION		
18. COMPANY NAME		32. FACILITY NAM	ИE.,	**	NO.	DENTIFICATION		
Mr. Frank I	nc.	*	TLD069506160	American	Chemical_	·	INDO1	5360265
				34. P.O. BOX OR 5	-	4.2		
201 West 155	th Street		22. TELEPHONE NUMBER	420 South	Colfax Ro	ad	126 75156	PHONE NUMBER
South Hollan 23. COMMENTS	d, Illinoi	s 60473	312 596-3377	Griffith,	Indiana		1 219	924-4370
		•	34	1	OR 7-50	10/7/8/ A1-	ກາ	,
						· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackno	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that received and coepte 38. AV THORACE D	the above named made.	iterials and indicated quantit	y (ies) has (hav	e) been 40. Date Accepted
24. AUTHORIZED SIGNA	TURE 25. 1	VAME (Print)	26. Qate Accepted	` <i>Y</i> \W	The applying ma	terials and indicated quantity	v(ies) has (hav	10 17 87
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials ar	od indicated quantity	(ies) has (have) been accepted	41. ALTERNATE H	d. IAZAR DOUS WAST	E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30. P	IAME (Print)	31. Date Accepted M (V D / Y		Natural Resources Waste Management		sistance Telepi 508-266-3232 300-424-8802	
. #	ð	٠ .		Box 8094 Madison, Wiscon	,	FOR DNR USE ONLY		

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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47. Emergency 24 Hour Assistance Telephone Number

(608-266-3232)

(800-424-8802)

In Wisconsin

FOR DNR USE ONLY

Outside Wisconsin

MANIFEST NUMBER

Please type or print clear	ly using ball point	pen - press hard.	•				<u> </u>				
GENERATOR (SHIPPE	R) SECTION			<del></del>							
I. COMPANY NAME	<u> </u>	<del></del>	2. EPA IDENTIFIC	ATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .				
Milwaukee Sol	vents & Ch	emicals	WID0233501	192			•				
4. P.O. BOX OR STREE	T ADDRESS								•		
14765 West Bo	bolink Ave	nue			T-,						
5. CITY, STATE, ZIP CO	DDE .		6. TELEPHONE NU		7						
menomonee Fal	ls, WI 530	51	414 252-	3550							
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	2 mg	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)		
(1) Tanker	4,500	Waste So	lvent N.OS	<b>8</b> , g	Flammable Liquid	UN1993	1. Solid 3, Mixture 2	F003			
				<del> </del>			1. Solid 3. Mixture 2. Liquid				
				•••			1. Solid 3. Mixture 2. Liquid	·			
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TRANSPORTER SECTI	ON'			.]-[	HAZARDOUS WA	STE FACILITY	SECTION				
18. COMPANY NAME			19. EPA IDENTIFIC	MION	32. FACILITY NAM	iE ;	. 4 4.	33. EPA IC	ENTIFICATION		
Mr. Frank 20. P.O. BOX OR STREET	Inc		TIDOGOEOÀTE		American (	Themical	•	T .	6360265		
20. P.O. BOX OR STREET	ADDRESS				34. P.O. BOX OR S	REET ADDRESS					
201 West 155	th Street		<u> </u>		420 South	Cdlfax Ros	ad				
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NU	1 1	35. CITY, STATE, Z	CIP CODE		1	HONE NUMBER		
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24. JUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date		1 hereby certify that is received and accepted	he above—med ma	F, DONEE		(C) /15/8/		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and I ackn	nd indicated quantit	v (les) has (have) been a	ccepted	41. ALTERNATE H		E FACILITY NAME	42. EPA ID NO.	ENTIFICATION		
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFIC NO.	ATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	M / D / Y		
29 ALITHODIZED SIGNA	VTUDE 130	NIAME (Dring)	121 0-1-	-			<del></del>				

46, MAIL TO:

Box 8094

Department of Natural Resources

Madison, Wisconsin 53707

Bureau of Solid Waste Management

MIDIY

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

**HAZARDOUS WASTE MANIFEST FORM** Wisconsin Statutes 144

A 29928

See reverse side, Copy 6,	for instructions	<b>.</b>			in Statutes 144	A 29928			
Please type or print clear	ly using ball po	nt pen – press hard	. 🔀 🥲	FORM 4	400-66	9-80	Ľ.,		
GENERATOR (SHIPPE	R) SECTION		<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>	· · · · · · · · · · · · · · · · · · ·	-4 -4			<u>-</u>	
1. COMPANY NAME			2. EPA IDENTIFIC	CATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS 2		
4. P.O. BOX OR STREE	TADDRESS	homicals	W10003335	20103					
1 1765 Intest 5. CITY, STATE, ZIP CO	Sobol BOR	ink Ave	6. TELEPHONE N	IUMBER			•		
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7. NUMBER & TYPE OF CONTAINER	8. GALLONS	33031	9. WASTE NAME	<u> </u>	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
1 Tunker	5000	Wile	alucat NO	S. "	Hammable	UNITIB	1. Solid 3. Mixture 2. Liquid	1003	
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TRANSPORTER SECTI	ON	<del> </del>		1 7-	HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFIC		32. FACILITY NAM	7		33. EPA II	IRECORDEST
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21. CITY, STATE, ZIP CO	214 211	<u> </u>	22. TELEPHONE N	WARE D. T.	35. CITY, STATE, 2	10 CODE	100.1	136 761 50	HONE NUMBER
South Hall		L 60173	(312).570	2 22 m M- 1				1	1424-4370
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27. 2nd. TRANSPORTER	COMPANY NAM	E	28. EPA IDENTIFIC		43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGNA	ATURE 3	D. NAME (Print)	31. Date M /	Accepted D / Y	Bureau of Solid	Natural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Telepi (608-266-3232) (800-424-8802)	,
					Box 8094 Madison, Wiscon	- 1	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

9-80

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GENERATOR (SHIPPE	R) SECTION			<u></u>	;				······
1. COMPANY NAME		. f:	2. EPA IDENTIFICATION NO	O. 3. COMME	NTS/SPE	CIAL INSTRUCTIO	NS		
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4. P.O. BOX OR STREE		. Λ		1	T.				
5. CITY, STATE, ZIP CO	1 ( - 1 c.)	Shirt Hy	6. TELEPHONE NUMBER	` <i>'</i>	4.				i
MUSICALE	Falls		(111) 1-252 -355	~ ·					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US HAZARD		11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
							1. Solld 3. Mixture 2. Liquid		
1. Tinler	200b	Waster So	West NOS	7		/(m/// 3	1. Solid 3. Mixture 2. Liquid	FOC3	76 per
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condition for transportation	according to the app	olicable regulations of t	he U.S. Department of Transpoi inmental Protection Agency.	10 mg	Die	li 1	Trees Diet	7 m	// /: // /
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TRANSPORTER SECTI	ON	Jir.	A Comment	HAZARDI	OUS.WA	STE FACILITY	SECTION		
18. COMPANY NAME		<del> </del>	19. EPA IDENTIFICATION	32. FACIL			1		ENTIFICATION
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24. AUTHORIZED SIGNA	TURE 25	NAME (Print)	26 Date Accepted	\	WVV	100/	レジニトに	<u>~`                                    </u>	17/6!
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27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHO	ORIZED :	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted					<del></del>	
			M / D / Y		ment of N	latural Resources		(608-266-3232)	
	•			Bureau Box 80		Waste Management		(800-424-8802)	
7			·		-	sin 53707	FOR DNR USE ONLY		

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

MANIFEST NUMBER	
A 29932	

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPE	R) SECTION	· · · · · · · · · · · · · · · · · ·						
1. COMPANY NAME		<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons		
Milaukee So	lvents & A	Chemicals	WID023350192			•		
4. P.O. BOX OR STREE	T ADDRESS	1		. ت	سيميم سور.			
14765 W. Bo	bolink Ave	enue -				•		
1			6. TELEPHONE NUMBER					
Menomonee P	11s, WI 5:	3051	(4]4 )·252-3550			· · · · · · · · · · · · · · · · · · ·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4500	Waste Solv	rent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture 2.	F003	32000
	,	÷				1. Solid 3. Mixture 2. Liquid #		
			\. \.			1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf			e and complete and that the	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED · M D Y
condition for transportation	according to the app	plicable regulations of	the U.S. Department of Transpor- commental Protection Agency.	Tang Pul	sich .	Terry Dietr	ich	11.15 181
·				(A, 1	h.	24.61	• •	
TRANSPORTER SECTI	ON			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM				360265
Mr. Frank, Inc 20. P.O. BOX OR STREET	ADDRESS		ILD069506160	America Ch	-		TUDOT	300203
	•			420 South		A		
201 West 155th			22. TELEPHONE NUMBER	35. CITY, STATE, 2	IP CODE	<u> </u>	136. TELEP	HONE NUMBER
South Holland,	Illinois	60473	312 ) 596-3377	Griffith,			219	924-4370
23. COMMENTS	11111013	00473	312 330 33.7	37. COMMENTS	111020110			
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24 AUTHORIZED SIGNA	TURE 35	NAME (Print)	26. Date Accepted	1 state to	dilla maria	Constant Popular	KALL	15 7
Vakent Herb	no Vi		21/1/5 1/M 150 1/4	received and accepted	J	terials and indicated quantit		
in proper condition for trans designated as Hazardous Was	portation and Lackr te Facility.	and indicated quantity nowledge that delivery		41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	NO.	ENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources		608-266-3232)	
		,		Bureau of Solid ' Box 8094 Madison, Wiscon	Waste Management sin 53707	Outside Wisconsin (	800-424-8802)	

## The state of wisconsin of the department of natural resources

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

Madison, Wisconsin 53707

MAN	IIFEST NUMBER	
Α	29934	

Please type or print clear	ly using ball point	pen - press hard.	FO	HW 44	- <del></del>	. 9-00		2300	<u> </u>
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION	VO. :	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So:	lvents & C	hemicals .	WID023350192	}			•		
14765 W. Bobe	olink Aven	ue	6. TELEPHONE NUMBER	_	40	<i>:</i>			
Menomonee Fa		061	(414)-252-355	_					
	115, 11 33		1 1414 232-333	<u>U_ </u> _	I	11. US DOT	T	T	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	· .	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds
(1) Tanker	5000	Waste Sol	vent N.O.S.	·	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid	F003	36,000
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This is to certify that the inf			e and complete and that the rked and labeled and are in pro	1	. AUTHORIZED SI	GNATURE	16. NAME (Print)	j.	17. DATE SHIPPED M D Y
condition for transportation	according to the app	olicable regulations of	the U.S. Department of Transponmental Protection Agency.		Temi L	Julia	Terry Dietri	ch	119 151
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TRANSPORTER SECTI	ON	:				ASTE FACILITY	SECTION	٠٠.	·
18. COMPANY NAME	1	. 源冷	19 EPA DENTIFICATION		32. FACILITY NAN	ΛΕ '.		33. EPA I NO.	DENTIFICATION
Mr. Prank In	ıc.		ILD069506160	_    <i>A</i>	merican Ch	nemicdal		IMDO	16360265
P.O. BOX OR STREET	T ADDRESS				34. P.O. BOX OR 5	TREET ADDRESS			
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in proper condition for trans designated as Hazardous Was	sportation and I acknowle Facility.	nowledge that delivery	shall be made to the facility		received and accepted	SGNATURE	39. NAME (Print)		40. Date Accepted
24. AUTHORYZED SINNA	JUBE / 25.	NAME (Print)	· 26. Date Accepted	<b>1</b>		A. 新	PUVNICE	-	14 81
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					Box 8094	-	FOR DNR USE ONLY		·

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using hall point pen — press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A	29935
<b>,</b> ,	23333

MANIFEST NUMBER

47. Emergency 24 Hour Assistance Telephone Number

(608-266-3232) (800-424-8802)

In Wisconsin

FOR DNR USE ONLY

Outside Wisconsin

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GENERATOR (SHIPPE	R) SECTION				••	****			
1. COMPANY NAME			2. EPA IDENTIFICATION NO	5	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Mtlwaukee So	lvents & C	hemicals	WID023350192	-	Jesen N				
14765 W. Bob	olink Aven	ue	6. TELEPHONE NUMBER	4					
1		• •		-					
Menomonee Fa	115, Wisco	nsin 53051	(414) 252-3550		т	11 US DOT	1	1	Γ
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Soly	rent N.O.S.		Flammable Liquid	UN1993	1. Solld 3. Mixture 2 2. Liquid	F003	36,000
							1. Solid 3. Mixture 2. Liquid		·
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the int				1	. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED
condition for transportation	according to the app	olicable regulations of	rked and labeled and are in prope the U.S. Department of Transpor onmental Protection Agency.		Zing // 3		Terry Dietr	ich	111/28/
					11				
TRANSPORTER SECTI	ON				HAZARDOUS WA		SECTION		
18. COMPANY NAME	,	4 4 4 4 8 8 8 8	19.EPA IDENTIFICATION NO.		32. FACILITY NAM	•		33. EPA IE	DENTIFICATION
Mr. Frank, In			ILD069506]60		American (	Chemical		LND01	6360265
20. P.O. BOX OR STREET		21.			34. P.O. BOX OR \$1				
201 West 155t					420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER		35. CITY, STATE, Z			1	HONE NUMBER
South Holland	, lllinois	60473	(312)596-3377	L	Griffith,	Indiana		299	924-4370
23. COMMENTS					37. COMMENTS				
		•			To 210	T - 50	0 62W 1/12/81	,	
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24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	- 1	1-8 1.		terials and indicated quantit	-/	4 M . AM . CW
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27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)	7	M / D / Y

31. Date Accepted

M / D / Y

46. MAIL TO:

Box 8094

Department of Natural Resources

Madison, Wisconsin 53707

Bureau of Solid Waste Management

30. NAME (Print)

29. AUTHORIZED SIGNATURE

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

A 29936

Please type or print clear	ly using ball point	t pen — press hard	١.	FORM	4400,88	. 3.80	<u> </u>		
GENERATOR (SHIPPE	R) SECTION						• .		
1. COMPANY NAME			2. EPA IDENTIF	ICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons	,	
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4. P.O. BOX OR STREE				· · · · · · · · · · · · · · · · · · ·	المعملو		•		
1777- 3751	The to the	1.6		Ì					
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE	NUMBER					
Mr. Warney	1/2 1	6 8 3057	(6/11/1)-35	1012: 60	• •				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME		10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
17. h.	× 11700	Buck	1000 AVG	25	11 mintole	6181143	1. Solid 3. Mixture 2. Liquid	] FUU3	36,000
					·		1. Solid 3. Mixture 2. Liquid	]	
		•			*		1. Solid 3. Mixture 2. Liquid	]	
This is to certify that the inf above named materials are p condition for transportation tation and the Wis. Departm	roperly classified, de according to the		rate and complete and ked and labeled and ie U.S. Department imental Protection	d are in proper t of Transpor-	$\widetilde{K}$ . AUTHORIZED SI	GNATURE	Tryvia Dilly	1.	17. DATE SHIPPED M D Y
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TRANSPORTER SECTI	· 41/	UU			HAZARDOUS WA		SECTION &		
18. COMPANY NAME	. //		EPA IDENTIFI		32. FACILITY NAM	-		NO.	DENTIFICATION
20. P.O. BOX OR STREET	<u>•</u>		10. 6.5C	S. Carlotte and	Along	. 1. 1	. \	7.7.1	16 16
				1	34. P.O. BOX OR ST	REET ADDRESS	1		
21. CITY, STATE, ZIP CO	/ \ <del></del>		<del></del>		/ <sup>1</sup> C:	<u></u>	· · · · · · · · · · · · · · · · · · ·		
Su that Alle	) L	7	ELEPHONE!	MUMBER M- (3)	35. CITY, STATE, Z	IN CODE	•		HONE NUMBER
23. COMMENTS					37. COMMENTS	300	7		
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I hereby certify that the above in proper condition for trans	ve named materials a	and indicated quant	ity(ies) has (have) been	accepted	I hereby certify that	the bove named ma	terials and indicated quar	<del>_</del>	
designated as Hazardous Was	te Facility,				received and recepted 38. AUTHORIZED	remare /	39. NANE (81)	السيساسي	10. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Dat	e Accepted	1 1/2 M	MACKET !	1 27710		バルグ
1-1934 / Call		7 / / D	11 11 1116	7/3/	I hereby certify that t received and accepted	he above named ma	terials and indicated quar		
I hereby certify that the about no proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackr te Facility.	and indicated quant nowledge that delive	ity(les) has (have) been ry shall be made to the	accepted facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA IE NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFI NO.	ICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)		e Accepted	46. MAIL TO:	(	47. Emergency 24 Hour	Assistance Telepi	none Number
		: e*		D / Y	Department of N	latural Resources Naste Management	In Wisconsin Outside Wisconsin	(608-266-3232) (800-424-8802)	)
	. •				Box 8094 Madison, Wiscon	•	FOR DNR USE ONLY	(333 12 1 3302)	
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#### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A 29937

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME	/ ,		EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	INS		
Meline	- 1 0/ W/M	1 - Electrical (1)	1002775015)		•	•		
4. P.O. BOX OR STREE	- 1 - 1 - 1 - 1 - 1							
5. CITY, STATE, ZIP CO		hock Hocas	TELEPHONE NUMBER					
1	115	1	(///)- JA JANG					
- Commence	/ 2015	<u>レル ~305 日</u>	1777 1 0 C 2 1 3 3 2 C		11 45 007	T	r	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WA	STE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
170,000	SULO .	122 50	. NO.	11	111553	1. Solid 3. Mixture	1201	3700
				/		1. Solld 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf above named materials are p			complete and that the labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	, ,	17.DATE SHIPPED M D Y
condition for transportation tation and the Wis. Departm	according to the app	olicable regulations	rotection Agency.	long for	ital.	Truy 1 He	1	11 15 151
		-						
TRANSPORTER SECTI	ON	. 1		HAZARDQUS WA		SECTION		
18. COMPANY NAME	1	$\cdot \omega$	TIFICATION	32. FACILITY NAM	1E /	$\Lambda = \mathcal{F}$	NO.	DENTIFICATION
20. P.O. BOX OR STREET			77 8 677 0	34. P.O. BOX OR 5	FORET ADDRESS		7 / / / / /	1/1. /21/21/
10. 10. 00X 0X 37 XZZ	•			1	, H. ( /	$C_{i,j} = C_{i,j}$	1	ł
21. CITY, STATE, ZIP CO			JUMBER	35. CITY, STATE, Z		, , ,	36. TELEP	HONE NUMBER
1 . 1 to 1 ! li			7-39/-7	1 /21/11/11	· 1	4	( )	1921/10
23. COMMENTS		<u></u>	<del></del>	37. COMMENTS	·			
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نعيز »	> herizelene	\		To	210 TC	TSO GE	U 11/12	/3;
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, a <sup>2</sup>								
I hereby certify that the abo in proper condition for trans	portation and Lackn	nd indicated quantity(les) owledge that delivery shall	has (have) been accepted be made to the facility	I hereby certify that received in accepted	the above named ma	terials and indicated quanti	ty(ies) has (have	e) been
designated as Hazardous Was	te Facility.	-		38. AUTHORIZED	ENATURE	39. NAME (Pirit)	4	Manage Accepted
24. AUTHORIZED SIGNA	1 URE 25.	NAME (Print)	26. Date Accepted	Thereby certify that	he above named ma	territis and indicated quanti	ty(ies) has that	D been
I hereby certify that the abo	ve named materials a	ad Indicated avantitudies		received and accepted		terials and indicated quanti		ENTIFICATION
designated as Hazardous Was	portation and I ackn- te Facility.	owledge that delivery shall	be made to the facility				NO.	
27. 2nd TRANSPORTER		28.	EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources		(608-266-3232)	
				Bureau of Solid ! Box 8094 Madison, Wiscon	Waste Management	Outside Wisconsin FOR DNR USE ONLY	(800-424-8802)	
			,	. ,	*			1 1

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM A100-66 9-80

A 29940

GENERATOR (SHIPPE	R) SECTION					<del></del>		
1. COMPANY NAME		121 1	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons,		
Milles Lee	Salver	S 16 (4 con 16)	1-11/1000 550192	1.				
4. P.O. BOX OR STREE		1						
17701 11		1. 1. 1.	<u> </u>	1,		( Spring		
5. CITY, STATE, ZIP CO	DDE - //	. 1.	6. TELEPHONE NUMBER	13	·	7		
The same of the sa		17: 31	1/11/-150-150	<u> </u>	<del>,</del>	<u>`</u>	<del>,</del>	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS,	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
17. 6.	5000	Waste C	June 1005	10/2000 166	111493	1. Solid 3. Mixture /	1.003	16 000
			<u> </u>			1. Solid 3. Mixture 2. Liquid		, .
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the info	ormation contained i	herein is true, accurate	e and complete and that the rked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED M D Y
condition for transportation	according to the app	licable regulations of	Me U.S. Department of Transportionmental Protection Agency.		The state of the s	Fire Vice	, -	انوا شار ندر
·	*							
TRANSPORTER SECTION	<u>N</u>			HAZARDOUS WA		SECTION		
18. COMPANY NAME	<u> </u>		19. EPA IDENTIFICATION NO. 7 ( ) ( ) ( ) ( ) ( ) ( ) ( )	32. FACILITY NAN	/ i	. (	I NO	DENTIFICATION
20. P.O. BOX OR STREET	ADDRESS.		7 Cherry Car O	34. P.O. BOX OR S		· · · · · · · · · · · · · · · · · · ·	14 ///	131626
,	ADDRESS	Clr. J		134. P.O. BOX OR 3	A Codd	/ <sub>2</sub>		
21. CITY, STATE, ZIP COI	DE .		22. TELEPHONE NUMBER	35. CITY, STATE, 2			136. TELEP	HONE NUMBER
W. Heat	<i>[[</i>	7/	(2/2)-556-33)	( , 11, 1)	i .	,		1-7-6 1 71
23. COMMENTS	101			37. COMMENTS	<u> </u>	<u></u>	_1	· · · · · ·
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I hereby certify that the abovin proper condition for transposignated as Hazardbus Wast	portation and I ackno	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that received and accepted 38. AUTHORIZED	the above named made.	sterials and indicated quanti	ty(les) has (hav	e) been 0. Date Accepted
24. AUTHORIZED SIGNA	<u> </u>	NAME (Print)	26. Date Accepted	-7/1/1/A		A JUST STATE		M O J
Krad hue		4KYDW415	U 12 KM	I hereby certify that	the above named ma	terlals and indicated quantil	y(ies) has (have	e) been
I hereby certify that the abovin proper condition for transposed as Hazardous Wast	e named materials as portation and I acknow e Facility	nd indicated quantity owledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42, EPA IC NO.	ENTIFICATION
27. 2nd. TRANSPORTER (			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGNA	TURE   30. I	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Teleph 608-266-3232) 800-424-8802)	
		TO2117	< T-SO 6RH-12/2/		-	FOR DNR USE ONLY		

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

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'ARDOUS WASTE MANIFES'	T FORM	
onsin Statutes 144		
M 4400-66	9.80	

A 29941

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		-	
Milwaukee S	Solvents &	Chemica1s	WID023350192	j	•				
1			· .	<u>'</u>					
14765 W. Bo	bolink Ave	enue							
1			6. TELEPHONE NUMBER						
Menomonee F	alls, WI	50051	414 252-3550		1	T		T	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
(1) Tanker	4500	Waste Solv	rent N.O.S.	Flammable Liquid	UN1003	1. Solid 3. Mixture 2	F003		
			į.			1. Solid 3. Mixture 2. Liquid		36000	
						1. Solld 3. Mixture 2. Liquid			
This is to certify that the int				15. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED	
condition for transportation	according to the app	plicable regulations of t	ked and labeled and are in proper he U.S. Department of Transpor- onmental Protection Agency.	Tolay J	Tuellank He	Terry Dietric	-	1217181	
						\$ 4			
TRANSPORTER SECTI	ON ,			HAZARDOUS WA	<u>.</u>	SECTION			
18. COMPANY NAME			19.EPA IDENTIFICATION NO.	32. FACILITY NAM	1E		33. EPA II	DENTIFICATION	
Mr. Frank, In	С		ILD069506160	American C	hemica1	<del></del>	INDO	16360265	
201 West 155t				·					
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	420 South		<u>.d</u>		WONE NUMBER	
South Holland			22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE  Griffith, Indiana  36. TELEPHONE NUMBER  (219) 924-4370					
23. COMMENTS	, 111111013	00473	7	37. COMMENTS	(219)-924-4370				
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I hereby certify that the abo	ve named materials a	and indicated quantity(	ies) has (have) been accepted	I hereby certify that	the bove named ma	iterials and indicated quantil	y(ies) has (hav	re) been	
in proper condition for trans designated as Hazarddus Was	portation and I ackr ite Facility.	nowledge that delivery	shall be made to the facility	38. AUTHORIZED	SANATURE	39. NAME (Print)	7	40. Date Accepted	
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	, 26. Date Accepted	1 - HIMM		MUMIL		25/7/8° )	
Mary Mus	1 a - 1 - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2	4RY ()?(40	シン - XM しり ダント	I hereby cortify that	the above named ma	terials and indicated quantit	y(ies) has (hav	e) been	
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackr ite Facility.	and indicated quantity ( nowledge that delivery	ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H				DENTIFICATION	
27. 2nd, TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted	L		L	L		
			M / D / Y		Natural Resources Waste Management		sistance Telep 608-266-3232 800-424-8802	)	
				Box 8094	-	FOR DNR USE ONLY			
		1.	210 K T-50 68	Madison, Wiscon パメコンニィ	isin 53707			1	

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See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

9-80

A 29942

GENERATOR (SHIPPE	R) SECTION						•-			
1. COMPANY NAME		2 *	2. EPA IDENTIFICATION NO	5.]	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
Milwaukee So	lvents & C	hemicals	%IDO23350192				<b>3</b> 1			
4. P.O. BOX OR STREE	T ADDRESS			Ţ	•				· .	
14765 Weset		venue		╛						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER				,		•	
Menomonee Fa	11s, WI 53	051	(414)-252-3550	1.			· · · · · · · · · · · · · · · · · · ·	·	<del></del>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	ال <u>ت</u> ر ــــــــــــــــــــــــــــــــــــ	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds	
(1) Tanker	500 ai	Waste Solv	rent N.O.S.		Flammable Liquid	UN1993	1. Solld 3. Mixture 2. Liquid	F003	17000	
HARRY LAND CO.	<u>1</u> . 4è	,					1. Solid 3. Mixture 2. Liquid			
		^	And the	٠.			1. Solid 3. Mixture 2. Liquid			
			te and complete and that the arked and labeled and are in prope		. AUTHORIZED SI	GNATURE	16. NAME (Print)	6	17. DATE SHIPPED	
condition for transportation	according to the app	plicable regulations of	the U.S. Department of Transportronmental Protection Agency.		Kan S	look .	Kin 131.00	le .	12/10/51	
TD4	<del></del>	<del>-</del>		_	<del></del>				<del></del>	
TRANSPORTER SECTI	ON		19.EPA IDENTIFICATION	.  -	HAZARDOUS WA		SECTION	33 EPA II	DENTIFICATION	
	·		NO			•		NO.		
Mr. Frank, I	. NC .		ILD069506160 -	-	American Chemical INDO16360265  34. P.O. BOX OR STREET ADDRESS					
201 West 155	• •			- 1						
21. CITY, STATE, ZIP CO	DE DE	<del></del>	22. TELEPHONE NUMBER	}-	420 South	COLTAX KOS	10	36. TELEP	HONE NUMBER	
South Hollan	d Illinoi	ie 60473	312 596-3377		Griffith.	Indiana	. •	(210	924-4370	
23. COMMENTS		13 04473	1 316 330 3311	ŀ	37. COMMENTS	Indiana	,		34454310	
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I hereby certify that the abo	ve named materials a	and indicated quantit	y (ies) has (have) been accepted y shall be made to the facility		I hereby certify that	the above named ma	terials and indicated quanti	ty(ies) has (hav	e) been	
designated as Hazardous Was	te Facility.		shall be made to the facility	Γ	received and a costle 38. AUTHORIZED		39. NAME (Print)	ر)	10. Date Accepted	
24 AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	Ł	بر بل جرا	The state of the s	1 mm 2 3 for 1 mm	. ابر است	- 10 10 10 10 10 10 10 10 10 10 10 10 10	
1. 1. 1. 1. 1. 1. 1.	<u> </u>	7118J DEC	Winz VEVORY		I hereby certify that received and accepted	the above named ma	terials and indicated quanti	ty(ies) has (have	e) been	
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and a ackn	and indicated quantity nowledge that deliver	x(les) has (have) been accepted y shall be made to the facility		41. ALTERNATÉ H	IAZARDOUS WAST	FACILITY NAME	42. EPA IE NO.	DENTIFICATION	
27. 2nd TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)	,	45. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Bureau of Solid	latural Resources Waste Management	Outside Wisconsin	ssistance Telept (608-266-3232) (800-424-8802)	)	
	11 11 11 11 11 11 11 11 11 11 11 11 11		6211 K T-50 6	El	Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY			
HAZARDOUS WA	STE FACILIT	ry /	12/10/	81	,	l				

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

	HFEST NUMBER	
A	29944	

Please type or print clear	ly using ball point	pen – press hard.	FC	DRM 4400-66	9-80	[/,	2004-	r 		
GENERATOR (SHIPPE	R) SECTION	·-···								
1. COMPANY NAME	.,,		2. EPA IDENTIFICATION	NO. 3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS				
Milwaukee So	lvents &	Chemicals_	NIDO23350192	_		· ·				
14765 West 1	Bobolink A	venue	6. TELEPHONE NUMBER							
Menomonee Fa			(414 )252#3550	·						
7. NUMBER & TYPE OF				10. US DOT	11. US DOT	12. PHYSICAL STATE	13. US EPA	14. SHIPPING		
CONTAINER	8. GALLONS	S	). WASTE NAME	HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)		WEIGHT (Pounds)		
(1) Tanker	9	Waste Sol	vent N.O.S.	Flammable Liquid	บท1993	1. Solid 3. Mixture 2. Liquid	F003	3,000		
	4750					1. Solid 3. Mixture 2. Liquid				
					,	1. Solid 3. Mixture 2. Liquid				
above named materials are p condition for transportation	roperly classified, de according to the app	escribed, packaged, ma plicable regulations of	te and complete and that the arked and labeled and are in protein the U.S. Department of Transpronmental Protection Agency.	or-	GNATURE	16. NAME (Print)	as ch	17. DATE SHIPPED M D Y		
	3.4			1. 12 1/2	www.	17/2	<del></del>			
TRANSPORTER SECTI	ON		<del> </del>	HAZARDOUS W	STE FACILITY	SECTION				
18 COMPANY NAME		<del></del>	19. EPA IDENTIFICATION	32. FACILITY NAM	1E .			DENTIFICATION		
Mr. Frank, In	ic.		1LB069506160	American	Chemical		INDO1	6360265		
				34. P.O. BOX OR S		•				
201 West 1551	th Street				Colfax Roa	ad				
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,				9. 924-437		
South Holland	l, Illinoi:	s 60473	(312)596-3377	· · · · · · · · · · · · · · · · · · ·						
23. COMMENTS				37. COMMENTS						
		•								
		.•								
I hereby certify that the abo in proper condition for trans	ve named materials a	and indicated quantity	y(ies) has (have) been accepted	t hereby certify that	Me above named ma	aterials and indicated quanti	ty(ies) has (hav	re) been		
designated as Hazardous Was	ite Facility.				GNATURE	39/ NAME (Friht)	ا نترت	Accepted		
20 AUTHORIZED SIGNA	TURE 23	NAME (Print)	26. Date Accepted	I hereby certify that	he above named ma	aterials and indicated quanti	ty(ies) has (hav	e) been		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackn	and indicated quantity	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42.EPA II NO.	DENTIFICATION		
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y		
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	46. MAIL TO: Department of I	latural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)		
			TO 211RT-SC		sin 53707	FOR DNR USE ONLY		,		

**HAZARDOUS WASTE MANIFEST FORM** Wisconsin Statutes 144

MANIFEST	NUMBER

A 20016

See reverse side, Copy 6, for instructions.  Wisco					sin Statutes 144	,  A 299			3
Please type or print clear	ly using ball point	pen — press hard.		FURIWI 4	400-00	. 9-80	Ľ	1 12 3 0 10	
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICAT	TION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So.	lvents & C	hemicals_	VID023350192		,		•		
14765 W. Bobo	olink Aven	ue			,				
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUM	BER			:		
Menomonee Fal	1s, WI 53	051	(414) 252-	3550	<b></b>	· · · · · · · · · · · · · · · · · · ·	·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE		14. SHIPPING WEIGHT (Pounds)
					Flammable		1. Solid 3. Mixture	7	
(1) Tanker	1500	Waste Sol	vent N.O.S.		Liquid	UN1993	2. Liquid	F003	11.50
							1. Solid 3. Mixture 2. Liquid		
	,						1. Solid 3. Mixture 2. Liquid		
This is to certify that the inf					S. AUTHORIZED SI	GNATURE	16. NAME (Print) &		17. DATE SHIPPED M D Y
above named materials are p condition for transportation						2/1	h	1	
tation and the Wis. Departm	ent of Natural Reso	urces or the U.S. Envir	ronmental Protection Age	ncy.	10m		ice Si	<u> </u>	1 12162
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TRANSPORTER SECTI	ON	<del></del>			HAZARDOUS WA		SECTION 1	1 1	SENTIFICATIÓN
18. COMPANY NAME	• .	<i>F</i> • • • • • • • • • • • • • • • • • • •	19. EPA IDENTIFICAT	iii		-	÷.	33. EPA 10	DENTIFICATION
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TO 205 R 7.50 BEM 1/21/82

Department of Natural Resources Bureau of Solid Waste Management Box 8094

Madison, Wisconsin 53707

In Wisconsin (608-266-3232) (800-424-8802) Outside Wisconsin

FOR DNR USE ONLY

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

9-80

MANIFEST NUMBER

A 29951

DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION NO	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
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5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	1					
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7. NUMBER & TYPE OF CONTAINER			WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds)	
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FORM 4400-66

TO 210 K T-50 6RM 2/8/82

31. Date Accepted

MIDIY

30. NAME (Print)

47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)

Box 8094 Madison, Wisconsin 53707

Department of Natural Resources

Bureau of Solid Waste Management

46. MAIL TO:

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

29. AUTHORIZED SIGNATURE

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

Bureau of Solid Waste Management

Madison, Wisconsin 53707

Box 8094

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(800-424-8802)

Outside Wisconsin

FOR DNR USE ONLY

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See reverse side, Copy 6, for instructions. FORM 4400-66 9.80 Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals
4. P.O. BOX OR STREET ADDRESS WID023350192 14765 W. Bobolink Avenue
5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER 414) 252-3550 Menomonee Falls, WI 53051 11. US DOT IDENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS (Enter number in box) WASTE CODE WEIGHT (Pounds) Flammable 1. Solid 3. Mixture 5000 36 000 FUOS (1) Tankor Liquid 2. Liquid Waste Solvent N.O.S. UN1993 1. Solid 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid DATE SHIPPED This is to certify that the information contained herein is true, accurate and complete and that the 15. AUTHORIZED SIGNATURE 16. NAME (Print) above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transpor tation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 32. FACILITY NAME 19. EPA IDENTIFICATION 33. EPA IDENTIFICATION American Chemical
34. P.O. BOX OR STREET ADDRESS [NDO1630265 Mr Frank Inc TTD060206160 201 West 155th Street 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER South Holland, Illinois 60473 I hereby certify that the above named materials and indicated quantity (ies) has (have) been I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted received and accepted. in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 39. NAME (Print) AUTHORIZED SIGNATURE 40. Date Accepted 25. NAME (Print) much & fratton I hereby certify that the above named materials and indicated quantity (les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 42. EPA IDENTIFICATION 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M / D / Y Department of Natural Resources In Wisconsin (608-266-3232)

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Please type or print clear	ly using ball point	pen – press hard.		FO	RM 4	4400-66	9-80			<del></del>
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Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144
FORM 4490-66

MANIFEST NUMBER

A 29961

GENERATOR (SHIPPE	R) SECTION				<del> </del>				
1. COMPANY NAME		1.	2. EPA IDENTIFIC		3. COMMENTS/SPE	CIAL INSTRUCTION	ONS		
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7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	). WASTE NAME	• 4 .	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Poun
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18. COMPANY NAME			19. EPA IDENTIFIC	ATION	32. FACILITY NAM			JJ. EPA IC	PENTIFICATION
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See reverse side. Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

14 20066

MANIFEST NUMBER .

Please type or print clear	ly using ball poin	t pen – press hard.	; TORM	4400-66	,9-80 ./.		23300	)
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18. COMPANY NAME			19. EPA IDENTIFICATION	132. FACILITY NAM	AE;	•	33. EPA 10	DENTIFICATION
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HAZARDOUS WASTE FACILITY

TO 210 K T-50 GEM 3/23/82

Madison, Wisconsin 53707

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE FACILITY

'HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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GENERATOR (SHIPPE	R) SECTION					<del></del>		
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TRANSPORTER SECTI	ON	<u> </u>		HAZARDOUS WA		SECTION	- [22.55]	
	<b>-</b>	, 4	19. EPA IDENTIFICATION	32. FACILITY NAM			NO.	IDENTIFICATION
Mr. Frank,	INC.		ILD069506160	American			TMD	016360265
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201 West 15 21. CITY, STATE, ZIP CO	oe otreet		22. TELEPHONE NUMBER	35. CITY, STATE, 2	Colfax Ro	) a u	36. TEI	EPHONE NUMBER
South Holla			(312)-596-3377	Griffith.			1	19-924-4370
23. COMMENTS	12X1	<u> </u>	512 350 337	37. COMMENTS	THETANE		1	2 227 7370
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In proper condition for transi	portation and Lackn	ind indicated quantity	(ies) has (have) been accepted shall be made to the facility	I hereby continue that received and accepted	the above named ma	aterials and indicated quantit	y(les) has (h	ave) been
designated as Hazardous Was 24. AUTHORIZED SIGNA	le Facility.	NAME (Print)	26. Date Accepted	38. AUTHORIZED	W/O	FDVNZ	EE	Dal Scened
1-11 St. 1.		111111111111111111111111111111111111111		I hereby certify that treceived and accepted	he above named ma	terials and indicated quantit	y(ies) has (h	ave) been
I hereby certify that the abov in proper condition for trans designated as Hazardous Wasi	re named materials a portation and I ackn le Facility.	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H		E FACILITY NAME	42. EPA NO.	IDENTIFICATION
27. 2nd. TRANSPORTER (			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del>]</del>	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		atural Resources		sistance Tele 608-266-323 800-424-880	12)
÷		T. 71	27-50	Box 8094	•	FOR DNR USE ONLY		

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

9-80

MANIFEST NUMBER

A 29969

GENERATOR (SHIPPE	R) SECTION							J '
1. COMPANY NAME	<del></del>	<del>,</del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ans		
Milero Lace	1	1	W100.3390192	ļ				
1 '4. P.O. BOX OR STREE	T ADDRESS	1-			•			
5. CITY, STATE, ZIP CO								
5. CITY, STATE, ZIP CO	ODE	<del></del> .	6. TELEPHONE NUMBER					
Monimus T.	-115 LN13	52.757	11111-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	500	1458 50	Juni NO	1 dig cond	Un 1573	1. Solid 3. Mixture ~ 2. Liquid	FLUS	$\mathcal{F}_{i}(\mathcal{C}_{i})$
				. /		1. Solid 3. Mixture 2. Liquid		
		. · ·				1. Solid 3. Mixture 2. Liquid		
This is to certify that the inflabove named materials are o			and complete and that the ked and labeled and are in proper	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
condition for transportation	according to the ap	plicable regulations of t	he U.S. Department of Transpor		1.1		Buch	1/2/1
lation and the Wis. Departm			onmental Protection Agency.	1600	er liv	17.19 7 21	12011	11012
	6.7 3 1 4	·	· · · · · · · · · · · · · · · · · · ·					
TRANSPORTER SECTI				HAZARDOUS WA		SECTION ,	133 500 15	ENTIFICATION.
18. COMPANY NAME			19. EPA IDENTIFICATION  NO.	32. FACILITY NAM	<i>;</i>	. "	NO.	DENTIFICATION
20. P.O. BOX OR STREET	. P.C	<u>_</u>	11 11 11 11 11 11 11 11 11	34. P.O. BOX OR S	( /~	<del>/</del>	1 . ( //	/
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21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE, 2	IP CODE (	127 1101	36 TELED	HONE NUMBER
11 11			(114)-596-31)	17, 11, 1	1 Toll	ie ii ii	<b>I</b>	1-21-4770
23. COMMENTS				37. COMMENTS	n +	·	`	
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I hereby certify that the abortin proper condition for trans- designated as Hazardous Wasi	portation and Lackr	and indicated quantity(i	ies) has (have) been accepted thall be made to the facility	I hereby certify that received and accepted 38. AUTHORIZED	tinabove named ma	terials and Indicated quantil	y (les) has (have	0. Date Accepted
24. AUTHORIZED SIGNA	-	NAME (Print)	. 26. Date Accepted		100/	1-171711-6	B I	M 19 82
milallen		Michail MA		I hereby certify that I	the above named ma	terials and Indicated quantit		/ <u>-</u> -
I hereby certify that the above in proper condition for transported as Hazardous Wasi	ve named materials a	and indicated quantity(i	ins) has (have) been assented	41. ALTERNATE H				ENTIFICATION
27. 2nd. TRANSPORTER (	•	·	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid V	latural Resources Waste Management		sistance Teleph 608-266-3232) 800-424-8802)	one Number
	•		T-50 6 RM	Box 8094 Madison, Wiscon	sin 53707	FOR DNR USE ONLY	<u> </u>	
ΗΛΖΛRDOUS WAS	STE FACILIT	Y 4.	22.82					

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

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MANIFEST NUMBER

See reverse side, Copy 6,	for instructions.			Wisconsin Statutes 144 FORM 4400-66			IA	A 29979		
Please type or print clear	ly using ball point	pen – press hard.		FURM 4	. 400-00	9-80	<u> </u>			
GENERATOR (SHIPPE	R) SECTION	·····			`			<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATI		3: COMMENTS/SPE	CIAL INSTRUCTIO	NS			
4. P.O. BOX OR STREE	2.1/1/11	· Change all	WIDULSTOO	141						
4. P.O. BOX OR STREE	T ADDRESS	<del></del>	<del></del>		:					
14765 W B	Lb. link A	ve.			į	•				
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Manunce	Fulls WI	23021	14141-6213	טנפ	·				<u> </u>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	4 9.	. WASTE NAME		: 10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
11) Tuntion	5,500	Wuste Sol	VILT N. U.S.		Flunnible	UN 1993	1. Solid 3. Mixture 2. Liquid	FUUZ	42,000	
							1. Solid 3. Mixture 2. Liquid			
				_i		· .	1. Solid 3. Mixture 2. Liquid	;		
This is to certify that the initiabove named materials are p condition for transportation	roperly classified, de	scribed, packaged, mai	rked and labeled and are in		5. AUTHORIZED SI	•	16. NAME (Print)	,	17. DATE SHIPPED M D Y	
tation and the Wis. Departm				cy.	Pilet Hu	Zng	Ruby+ HISTZ	Co	5 110182	
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TRANSPORTER SECTI	ON			• • •	HAZARDOUS WA		ECTION			
18. COMPANY NAME	1- +		19.EPA IDENTIFICATIO		32. FACILITY NAM				ENTIFICATION	
Mr Frun 20. P.O. BOX OR STREET	K Inc		1600695061	60	A P.O. BOX OR ST	1. (4cm)	col	INDO	1630562	
		<i>t</i> ~		·	345 P.O. BOX OR ST	REET ADDRESS				
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			(3/ L ) - 5 96 3	EH	GVIFTIL	IP CODE		1	1914-437	
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					37.1 COMMENTS					
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I hereby certify that the abo	ve named materials a	nd indicated quantity	(lest has (have) been accen	led	I hereby con ly that !	he above named mat	erials and indicated quanti	ty(les) has (have	) been	
in proper condition for trans designated as Hazardous Was	portation and Lackn	owledge that delivery	shall be made to the facilit	iÿ	recei of and accepted 38. ¡AUTH DELZED	GIGNATURE	MAMENETINET	4	O. Date Accepted	
24. AUTHORIZED SIZNA		NAME (Print)	26. Dale Acce		TAPPA		PDUNCE		M AD &	
11/11/11	100 CV	リレタ わくはん	V 1010	211	I hereby certify that treceived and accorded	he above named mat	erials and Indicated quanti	ty(les) has (have	) been	
I hereby certify that the about in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackn te Facility,	nd indicated quantity ( owledge that delivery	(ies) has (have) been accep shall be made to the facilit	ted y	41; ALTERNATE H			42. EPA ID NO.	ENTIFICATION	
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATIONO.	NC	43. AUTHORIZED S	GIGNATURE	44. NAME (Print)	14	5. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Acce	pted	<del> </del>					

46. MAIL TO:

Box 8094

Department of Natural Resources

Madison, Wisconsin 53707

Bureau of Solid Waste Management

To 210 Tr T-50 GRM 5-10.82

M/D/Y

47. Emergency 24 Hour Assistance Telephone Number (608-266-3232) in Wisconsin Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

A 29983

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION			, .		:			
1. COMPANY NAME	<del></del>		2. EPA IDENTI	FICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	)NS		
Milwaukee Sol	lvents & Cl	nemicals	WID02335	0192	ŕ	• .			
4. P.O. BOX OR STREE	T ADDRESS				Į.	,			
14765 W. Bobo		16		İ	: · · · · · · · · · · · · · · · · · · ·	•			
S. CITY, STATE, ZIP CO			6. TELEPHONE	ž.					
Menomonee Fal	lls, WI 530	51	/ (414)-]:	252-3550	i	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER,	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tunky	رنان رنا	Waste Solv	rent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid	7003	3 <i>5</i> ,000
		er v ngr <sub>e</sub> r, s	<b>*</b> } .			(* 1 ) ·	1. Solid 3. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the infabove named materials are p					5. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
condition for transportation tation and the Wis. Departm	according to the app	olicable regulations of t	he U.S. Departme		Ribert H	Entral.	Robert Heit	zer	5 119 632
TD 4 NODO 5755 65 ==	<del></del>						<del> </del>	<del></del>	
TRANSPORTER SECTI	ON		19. EPA IDENTIF	I CATION	HAZARDOUS WA		SECTION	122 600 10	DENTIFICATION
1			NO.	1 1		•		NO.	. 1
Mr. Frank, I	nC;		ILD065506	100	American C	hemical		TNDO	L6360265
· ·				· 1	,		, ,		
201 West 155 21. CITY, STATE, ZIP CO	tn Street	<del></del> -	22. TELEPHONE	NUMBER	420 South 35. CITY, STATE, Z	COLTAX KOA	a	36. TELES	HONE NUMBER
		- 60477		1 1		•		1	
South Hollan 23. COMMENTS	u, IIIInol	3 004/3	<b>312</b> 59	10-33//	Griffith.	Inclana	<del></del>	415	924-4370
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I hereby certify that the above	ve named materials a	nd indicated quantity	ies) has (have) hee	n accepted	I hereby certify that	// The above named ma	terials and indicated quanti	ty(les) has (hav	e) been
In proper condition for trans designated as Hazardous Was	portation and I ackn te Facility.	owledge that delivery	shall be made to th	a facility	received zna accepted 38. AUTHORIZED S	1.	39 NAME (Print)		U. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Da	te Accepted	MANKO	0	FDUN I-F	<i>←</i>	M/1P62
JAN WINT	(1, 1) = 10	184 DallE	/ 1 1	191721	I hereby certify that t	he above named ma	terials and indicated quantil	ty(ies) has (have	/ -
I bereby certify that the above interpreted for transfer designated as Hazardous Wasi	ve named materials a portation and I ackn te Facility.	nd indicated quantity( owledge that delivery	ies) has (have) bee shall be made to th	n accepted ne facility	41. ALTERNATE H				DENTIFICATION
27. 2nd TRANSPORTER			28. EPA IDENTIF NO.		43. AUTHORIZED S	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)		te Accepted	46. MAIL TO: Department of N	atural Resources	47. Emergency 24 Hour A	ssistance Teleph (608-266-3232)	
	l				Bureau of Solid V	Vaste Management		(800-424-8802)	
		TOZIIR	T-50 GR	M -	Box 8094 Madison, Wiscons	in 53707	FOR DNR USE ONLY	<u> </u>	
HVAYDDUIG MVV	פיינים עאכינו נייי		.29.82						

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

A 29985

Please type or print clear	ly using ball poin	t pen – press hard.					<del></del>	
GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons	<del></del>	
Milwaukee Sol	vents & C	hemicals	WID023350192	•				
4. P.O. BOX OR STREE								ł
14765 W. Bobo		110	i					
5. CITY, STATE, ZIP CO		ue	6. TELEPHONE NUMBER			Assign 1		<b>,</b>
,		061			* * * * * * * * * * * * * * * * * * * *			
Menomonee Fal	TB' MT 23	021	414 252-3550		<del></del>		<del></del>	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	, WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/) Tanker	5000	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	38,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
condition for transportation	roperly classified, d ≨ccording to the ap	lescribed, packaged, ma pplicable regulations of		Ruh & A		Robert Heitz	er	17. DATE SHIPPED
TRANSPORTER SECTI	ON .			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM		02011011	33. EPA 10	DENTIFICATION
Mr. Frank, I	10		NO. 1LD069506160	American (	'homi an l	~	TNDO1	.6360265
20. P.O. BOX OR STREET	ADDRESS		110003300100	34. P.O. BOX OR ST	REET ADDRESS		LINDOI	0300203
201 West 1550	th Street			420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE, Z	IP CODE			PHONE NUMBER
South Holland	i, Illinoi	в 60473	(312)596-3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS	, <del>;,</del>			37. COMMENTS		*************************************		
hereby certify that the above in proper condition for trans	ve named materials portation and I ack	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that is received and accepted 38. AUTHOR CED S	he above named ma	terials and indicated quanti	ty (les) has (have	e) been
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	Market State	سر مرتفوی	TOUNT		-M 76 27 M
	re named materials portation and Lacking Facility	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	received and accepte 41. ALTERNATE H.		terials and Indicated quanti E FACILITY NAME		DENTIFICATION
77. 2nd. TRANSPORTER (			28. EPA IDENTIFICATION NO.	43. AUTHORIZED S	GIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y
9. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		atural Resources Vaste Management		ssistance Telept (608-266-3232) (800-424-8802)	)
		T 311-	C7-50	Box 8094 Madison, Wiscons	in 53707	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 9-80

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MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME	_		2. EPA IDENTIFICATION N	0.	3. COMMENTS/SPE	CIAL INSTRUCTIO	INS		
Milwaukee S	olvents & (	Chemicals	WIDO23350192	1			·.		-
4. P.O. BOX OR STREE				7					
14765 W. Bo	bolink Ave	nue		1.			· • •		
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER						
Menomonee F	alls, WI 5	3051	(414)252-3550		1				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		WASTE NAME	į		11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	5000	Waste Sol	vent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	3 3,000
			· .		·		1. Solid 3. Mixture		
					45-	,	1. Solid 3. Mixture 2. Liquid		
This to certify that the intabove named materials are p condition for transportation tation and the Wis. Departm	roperty classified, des according to the app	cribed, packaged, mar licable regulations of t	and complete and that the ked and labeled and are in prop helu.S. Department of Transpo onmental Protection Agency.		AUTHORIZED SIG	GNATURE	Ribert //ci	tzer	17. DATE SHIPPED M D Y
*				74	1999	Completion Company	- 1 1 to 1 to 1		<u> </u>
TRANSPORTER SECTI	ON			] [7	HAZARDOUS WA	STE FACILITY	BECTION	:	
18. COMPANY NAME		•	19. EPA IDENTIFICATION		32. FACILITY NAM		1	33. EPA II	DENTIFICATION
Mr. Frank,	Inc.	·	TLD069506160		3ma=4===	Chamical		INDO	6360265
20. P.O. BOX OR STREET	ADDRESS			] []	4. <del>10.551</del> 589				•
201 West 1	55th Street					n Colfax R	oad	***	
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER		5. CITY, STATE, Z				HONE NUMBER
South Holl 23. COMMENTS	and, Illino	is 60473	1 312 586-3377		Griffith,	, Indiana		(219	924-4370
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I hereby certify that the abo	ve named materials ar	nd indicated quantity(	ies) has (have) been accepted				terials and indicated quanti	ty(les) has (hav	e) been
in proper condition for trans designated as Hazardous Was	portation and Lacknote te Facility.	owledge that delivery s	shall be made to the facility		eceived Applaccepted 18. AU HORIZED S	NATURE	39 NAME (Print ,- ,		10 Date Agcepted
24. AUTHORIZED SIGNA	TURE 25. 1	AME (Print)	/ 26. Date Accepted	F. 6	-Nun		YW W ~ t	: <u> </u>	10/11/01
15/10/11/1		11 7111111 11	/ 11 1/2 1/2 L		hereby certify that fi	e above named mai	erials and indicated quantil	y(les) has (hav	e) been
I hereby certify that the about in proper condition for trans designated as Hazardous Was	portation and Lackur	id indicated quantity( wledge that delivery s	ies) has (have) been accepted that the made to the facility		1. ALTERNATE				DENTIFICATION
27. 2nd, TRANSPORTER	•		28. EPA IDENTIFICATION NO.	4	3. AUTHORIZED S	IGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30. N	IAME (Print)	31. Date Accepted M / D / Y	4		atural Resources Vaste Management		ssistance Telepi 608-266-3232) 800-424-8802)	ſ
		To 210 F			Box 8094 Madison, Wiscons	in 53707	FOR DNR USE ONLY		
LIATADDOME MAN	STE FACILIT	Y GRNI	1 6.//.82			L			

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard. HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME		<del>,</del>	2. EPA IDENTIFICATION N	O. 3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		
Milwaukee Sc	lvents & C	Chemicals	WIDO23350192		·,	•		
4. P.O. BOX OR STREE			A	7				
14765 W. Bob	<b>A</b> link Aver	iue						
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER					}
Menomonee Fa	11s. WI 53	3051	(414)-252-3550					
	,				11. US DOT	T.: 2		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
	/			Flammable		<del></del>	<del> </del>	
Tanker	4 800	Waste So	olvent NOS	Liquid	UN1993	1. Solid 3. Mixture 2	F003	3000
zamez		Habet be				<del>                                     </del>	<del> </del>	
			••			1. Solid 3. Mixture	1	ľ
				<del></del>			<del> </del>	
	•					1. Solid 3. Mixture 2. Liquid	1	1
This is to certify that the abo	ove named materials	are properly classified	, described, packaged, marked	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE
and labeled and are in prope	r condition for trans	portation according to	the applicable regulations	1	<b>~</b> /			17. DATE · SHIPPED M D Y
of the U.S. Department of T I also certify that the inform			epartment of Natural Resources.	Belief	H de Tour	Robert Heit	zer	6/2/19/
	1			17 121 (1907)		L		
TRANSPORTER SECTION	ON			HAZARDOUS WA	CTE EACH ITY	CECTION	<del></del>	· · · · · · · · · · · · · · · · · · ·
18. COMPANY NAME	ON .		19. EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. FPA IC	ENTIFICATION
Mr. Frank, In	<b>a</b>		ILD065506160 4.	American				.6360265
20. P.O. BOX OR STREET			110003300100 13,	34. P.O. BOX OR ST			111002	.0300203
201 West 155t			• '	l I	Colfax Ro	a d		Ì
21. CITY, STATE, ZIP COI			22. TELEPHONE NUMBER	35. CITY, STATE, 2			126 75150	HONE NUMBER
		60472	•					-924-4370
South Holland	, lllinois		(312)596-3377	Griffith,	Indiana		(216	1-924-43/4
23. COMMENTS			<del>-</del> -	37. COMMENTS				
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		P. Sand	47	4 11/1 h				
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I hereby certify that the abov	e named materials a	nd indicated quantity(	les) has (have) been accepted	I hereby certify that i	he above named ma	terials and indicated quanti	ity(ies) has (have	ij been
in proper condition for transp designated as Hazardous Wast	e Facility.	owledge that delivery	snall be made to the facility	38 AUTAGRIZED	TATURE	39. NAME (Print)	- 4	0. Date Accepted
24. AUTHORIZED SIGNA	TURE 25	NAME (Print)	26. Date Accepted	The Will	101	EDUNEFI		M2971
Kaken Fr	Marian K	1100211 16	20145 6125 182	I haraby terrily that I	he above named ma	terials and indicated quanti	ty(ies) has (have	) been
I hereby certify that the abov	e named materials a	nd indicated quantity(	ies) has (have) been accepted	41. ALTERNATE H	AZARDOUS WASTI	E FACILITY NAME	42. EPA ID	ENTIFICATION
in proper condition for transp designated as Hazardous Wast	ortation and Lackn e Facility.	owledge that delivery	shall be made to the facility			•	NO.	1
27. 2nd. TRANSPORTER C	OMPANY NAME		28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5. Date Accepted
		j	NO.		]	•	ļ	M / D / Y
29. AUTHORIZED SIGNA	TURE   30. 1	VAME (Print)	31. Date Accepted			L	<del>-</del>	
	[		M/D/Y	46. MAIL TO: Department of N	atural Resources	47. Emergency 24 Hour A In Wisconsin	ssistance Teleph (608-266-3232)	one Number
				Bureau of Solid V	Vaste Management		(800-424-8802)	
		Tarint	7-57 6PM	Box 8094 Madison, Wiscons	in 53708	FOR DNR USE ONLY		
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HAZARDOUS WAS	STE FACILITY	Y	6.20.82		L			

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION				•				
1. COMPANY NAME			2. EPA IDENTIFICATION N	0.	3. COMMENTS/SPE	CIAL INSTRUCTION	ONS .		
Milwaukee So	olvents & (	Chemicals	WIDO23350192	1	•				
4. P.O. BOX OR STREE	T ADDRESS		<del></del>	ヿ					
14765 W. Bol	oolink Ave	nue		.   *	•				
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER				•		
Menomonee Fa	alls, Wisc	nsin 53051	(414 ) - 252 - 3550	)		Va			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	160. 1 G 9.	WASTE NAME "	†	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING EWEIGHT (Pound
( / ) TANKER	5,000	Waste Solv	rent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2.	F003	" 40,000
				į			1. Solid 3. Mixture 2. Liquid		
							1. Solid 3, Mixture 2. Liquid		
This is to certify that the ab			, described, packaged, marked,	1	5. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
			the applicable regulations partment of Natural Resource:	.	12 1 16	~11 A	Robert Hei	<b></b>	
Lalso certify that the inform					Robert 4	Mindly-in	KODELL HET	CZGL	21.43
TRANSPORTER SECTI	ON			] [	HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION NO.	7 [	32. FACILITY NAM	1E		33. EPA I	DENTIFICATION
Mr. Frank, In	ic.		ILD069506160	]	American C	hemical			16360265
			, ,	7 : F	34. P.O. BOX OR S	TREET, ADDRESS	<b>4</b> (1)		
_201 West 155t	n Street	<b>4</b> / 1	<b>→</b> **	$\perp$	420 South	Colfax Roa			•
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	7	35. CITY, STATE,	IP CODE	<del></del>	36. TELE	PHONE NUMBER
South Holland	. Illinois	60473	(312) 586-3377	1 1	Griffith.	Indiana		(21	9-924-437
23. COMMENTS	<u> </u>			1 F	37. COMMENTS		<del></del>		
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I hereby certify that the above	ve named materials a	nd indicated quantity(	ies) has (have) been accepted	┪┝	I hereby certify that	the above named ma	terials and Indicated quan	lity(les) has (hav	re) been
in proper condition for trans designated as Hazardous Was	portation and Lackn	owledge that delivery	hall be made to the facility	1 -	received and received 38. AUTHOR IN TO	SIGNATUREA	terials and Indicated quant		40 ADate Accepted
24 AUTHORIZED SIGNA	•	NAME (Print)	26. Date Accepted	1	M	MINHIT	17777	1-1-1	4/22/8
1-1 11	1.	1. 12 11 1	- 1/ M/P//X	<b> -</b>  -	I hereby certify that received and accepted	he above lained ma	terials and indicated quant	liv(ies) has thay	e) been
Thereby certify that the above	e named materials a	nd Indidated ourotitud	ins) has (have) been accepted		received and agcepted	. (1		·	DENTIFICATION
in proper condition for transposed as Hazardous Wasi	portation and Lackn	owledge that delivery s	hail be made to the facility	-	recently ich	ALANDODS WASI	C. ACTELL LIMINE	NO.	SELTIN ICATION
27. 2nd. TRANSPORTER (		<del>-</del>	28, EPA IDENTIFICATION	┧├	43. AUTHORIZED S	GONATURE	44. NAME (Print)	<u> </u>	45. Date Accepted
		<u>.</u>	NO.	1			44. HAME (FILL)	]`	M / D / Y
29. AUTHORIZED SIGNA	TURE 130 I	VAME (Print)	31. Date Accepted	{ Ľ	<u>;                                    </u>				
and the state of t	30.	war transf	M / D / Y		46. MAIL TO:		47. Emergency 24 Hour		
			* * * * * * * * * * * * * * * * * * * *	ĺ	Department of N Bureau of Solid V	atural Resources Vaste Management	In Wisconsin Outside Wisconsin	(608-266-3232) (800-424-8802)	
			65 50		Box 8094	•	FOR DNR USE ONLY	(550 424-0802)	<u></u>
		1/2/0	E7-50		Madison, Wiscons	In 53708	, GR DIAK OSE ONEY		

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION		<del></del>	-	<del></del>				
1. COMPANY NAME			2. EPA IDENTIFIC	ATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTION	ONS		
Milwaukee So		hem	WIDO233501	192					
4. P.O. BOX OR STREE									
14765 W. Bob		ue							1
5. CITY, STATE, ZIP CO		0.5.1	6. TELEPHONE NU						1
Menomonee Fa	115, W1 53	021	(414)252-	-3550	<del></del>		T	т	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
/ \ Tanker	(49)	Waste Sol	vent NOS	ί	Flammable Liquid 16	UN1993	1. Solid 3. Mixture 2 2. Liquid	F003	40,000
				<b>-</b>		***	1. Solid 3. Mixture 2. Liquid		
		•	,				1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab					5. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
of the U.S. Department of T Lalso certify that the inform				Resources.	Not A	Hitm	Robert Heit	tzer	11013L
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TRANSPORTER SECTI	ON		19. EPA IDENTIFICA	07100	HAZARDOUS WA		SECTION	133 600 11	DENTIFICATION
			NO.	- 1 1		•		NO.	
Mr. Frank, II	ADDRESS	<u> </u>	ILD069506	160	American 34. P.O. BOX OR ST	Chemical	<del></del>	INDO	16380265
, <u> </u>		•					ond 1		
201 West \1551	DE DE		22. TELEPHONE NU	JMBER	420 South	IP CODE	Oau	36. TELEP	HONE NUMBER
South Holland		60473	( 31/2 58	6-3377	Griffith.			( 27	9 924-4370
23. COMMENTS	/				37. COMMENTS				2 224 4210
\ <b>\</b>					•		,		
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, N <sub>e</sub>	1	•	•						j
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I hereby certify that the above in proper condition for transp	e named materials a	nd indicated quantity (i	ies) has (have) been ac	cepted	I hereby certify that t received and accepted	he above named ma	iterials and indicated quanti	ty(les) has (have	e) been
designated as Hazardous Wasi	e Facility.				received and accepted	NATURE	39. NAME (Print)	4	0. Date Accepted
24. AUTHORIZED SIGNA	TURE   25. 1	NAME (Print)	26. Date A M <sub>./</sub> D	-/ X	Trum	ee	レンノハト		1000
	<del>    </del>	<u> </u>		-/ - 2	i heleby tertify that received and accepted	ne above named ma	ternals and indicated quantit		<u> </u>
I hereby certify that the above in proper condition for transposes granted as Hazardous Wast	e Facility.			cillty	41. ALTERNATURA		E FACILITY NAME	NO.	ENTIFICATION
27. 2nd TRANSPORTER C			28. EPA IDENTIFICA	ATION	43. AUTHORIZED S	IGNATURE	44. NAME (Print)	14	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TURE 30. I	NAME (Print)	31. Date / M / D			atural Resources /aste Management		sistance Teleph 608-266-3232) 800-424-8802)	one Number
		To 1977	1 100 6 1'W		Box 8094 Madison, Wiscons	in 53708	FOR DNR USE ONLY		
HAZADDOHG WAG	יייז זו אם בתב	· 7	7.2682						

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen in press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANI	FEST	NUMBER

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Please type or print clear	ly using ball poin	t pen 🚣 press hard.						<del></del>	
GENERATOR (SHIPPE	R) SECTION	· -					<del></del>		
1. COMPANY NAME MILWAUKEE SOLVI	ents & Chemi	CALS		. 1	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
l .		\$ · -							
5. CITY, STATE, ZIP CO	IXEE SOLVENTS & CHEMICALS  W. BOBOLINK AVENUE  STATE, 2P CODE  NEEP FALLS, WI 53051  B. A TYPE OF  B. GALLONS  9. WASTE NAME  H. AVENUE  FLAMMABLE  LIQUID  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  1. Liquid  IN1993  1. Solid 3. Miniture  2. Liquid  IN1993  1. Solid 3. Miniture  2. Liquid  IN1993  1. Solid 3. Miniture  2. Liquid  IN1993  1. Solid 3. Miniture  2. Liquid  IN1993  1. Solid 3. Miniture  2. Liquid  3. Solid 3. Miniture  2. Liquid  3. Solid 3. Miniture  3. Liquid  3. Solid 3. Miniture  3. Liquid  4. NAME (Pinit)  IN1963506160  IN1963506160  IN2. FELEPHONE NUMBER  IN2. FOR OBERT HEITZER  IN1963506160  IN19636  IN1963506160  IN196366  IN196366-3377  IN196								
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	9. WASTE NAME			11. US DOT IDENTIFICATION NUMBER			14. SHIPPING WEIGHT (Pound
( ) TANKER	5,000	WASTE SOLVE	NT NOS			UN1993	1. Solid 3. Mixture 2 2. Llquid	F003	40,000
					- a				
							2. Liquid		
					5. AUTHORIZED S	IGNATURE	16. NAME (Print)	• •	17. DATE SHIPPED M D Y
of the U.S. Department of 1	Fransportation and I	he EPA and the Wis. (	Department of Natural		Robert	Heiter	ROBERT HEITZE	k	7127137
TRANSPORTER SECT	ION				HAZARDOUS W	ASTE FACILITY	SECTION	· · · · · · · · · · · · · · · · · · ·	
18. COMPANY NAME	1014		19. EPA IDENTIFICA	ATION			JECTION .	33. EPA 1	DENTIFICATION
MR. FRANK, INC.					AMERICAN CE	IEMICAL.			
20. P.O. BOX OR STREE	T ADDRESS				34. P.O. BOX OR S	TREET ADDRESS	, l, j		<u> </u>
201 WEST 155TH S	TREET	***	22 TELEPHONE NI	IMBED	420 SOUTH C	COLFAX ROAD		126 TELE	HONE NUMBER
SOUTH HOLLAND. I		73		1 1	GRIFFITH. I	•			924-4370
23. COMMENTS		٠.			37. COMMENTS	•	•		•
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							•		
I hereby certify that the abo	ve named materials	and indicated quantity	y (ies) has (have) been as	ccepted	I hereby certify that	the above named ma	terials and indicated quanti	ty(les) has (hav	re) been
designated as Hazardous Was	te Facility,				38. AUTIORIZED	SIGNATURE	39. NAME (Print)		Date Accepted
24. AUTHORIZED SIGNA	25.				I he eby certify that	e above named ma	terials and indicated quantil	y(les) has (hav	e) been
in proper condition for trans	portation and Lacki	and Indicated quantity	(ics) has (have) been ac	ccepted				42. EPA 10	DENTIFICATION
	•			ATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
9. AUTHORIZED SIGNA	TURE 30.	NAME (Print)			Department of N		In Wisconsin: (	608-266-3232	hone Number
		1	27.50		Box 8094			000-424-8802	<u>,                                      </u>

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

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# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

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MANIFEST NUMBER

GENERATOR (SHIPPER) SECTION 2. EPA IDENTIFICATION NO 3. COMMENTS/SPECIAL INSTRUCTIONS 1. COMPANY NAME MILWAUKEE SOLVENTS & CHEMICALS WID023350192 4. P.O. BOX OR STREET ADDRESS 14765 W BOBOLINK AVENUE 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER 252-3550 MENOMONEE FALLS, WI 53051 11. US DOT IDENTIFICATION NUMBER 13. US EPA 14. SHIPPING 10. US DOT 12. PHYSICAL STATE 7. NUMBER & TYPE OF 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) HAZARD CLAŠS (Enter number in box) CONTAINER FLAMMABLE 1. Solid 3, Mixture F003 31,500 4,500 / TANKER 2. Llquid WASTE SOLVENT NOS LIQUID UN1993 1. Solid 3. Mixture 75 2. Liquid 1. Solld 3. Mixture 2. Llquid 16. NAME (Print) This is to certify that the above named materials are properly classified, described, packaged, marked, 15. AUTHORIZED SIGNATURE SHIPPED and labeled and are in proper condition for transportation according to the applicable regulations M D of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. 8/13/82 ROBERT HEITZER i also certify that the information contained herein is true, accurate and complete. . 5.67 TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION MR. FRANK, INC. ILD069506160 AMERICAN CHEMICAL IND016360265 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 201 WEST 155th STREET 420 SOUTH COLFAX ROAD 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER (219 924-4370 SOUTH HOLAND, ILLINOIS 60473 586-3377 GRIFFITH, INDIANA 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity(les) has (have) been I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. received and accepted. 39. NAME (Print) AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted I hereby certify, that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility 41. ALTERNATE MAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION designated as Hazardous Waste Facility. 21. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M . , D / Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802) Box 8094 TO 210 27.50 6/11/ FOR DNR USE ONLY Madison, Wisconsin 53708

HAZARDOUS WASTE FACILITY

8.13.82

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME	· · · · · · · · · · · · · · · · · ·		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	vents & Ch	emicals	WIDO23350192					
4. P.O. BOX OR STREE	T ADDRESS				:			
14765 W. Bobo	link Avenu	e	į			•		
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER	<i>:</i>				
Menomonee Fall	ls. <b>W</b> I 530	51	( 414- 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		WASTE NAME	10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	5000	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	33,000
( )	0000					1. Solid 3. Mixture 2. Liquid	<u> FUUJ</u>	3000
			-			1. Solid 3. Mixture 2. Liquid		
			, described, packaged, marked,	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in prope of the U.S. Department of T Lalso certify that the inform	ransportation and th	e EPA and the Wis. De	partment of Natural Resources.	Rd of H	cityl	Robert Hei	tzer	S/17/32
TRANCRODIER CECTI	ON			HAZARDOUS WA	ACTE FACILITY	CECTION	<del></del>	<del></del> _
TRANSPORTER SECTI	UN		19. EPA IDENTIFICATION	32, FACILITY NAM		SECTION	[33 FPA I	DENTIFICATION
			NO.	i			NO.	
Mr. Frank, Ir 20. P.O. BOX OR STREET	C.		<u> </u>	American 34. P.O. BOX OR S	Chemical		I INDO	16360265
			2	420 Sout	h Colfax	Road : ''	£,	
201 West 155 21. CITY, STATE, ZIP CO	th Street	· · · · · · · · · · · · · · · · · · ·	22. TELEPHONE NUMBER	35. CITY, STATE,	tin cone		136 TELE	PHONE NUMBER
				1				
South_Holla	and, Illino	ois 60473	(312)-586-3377	Griffiti 37. COMMENTS	i, Indiana		' 21	9 <sup>.</sup> 924-4370
23. COMMENTS	•			37. COMMENTS				
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			•	1				
			ĺ					
· · · · · · · · · · · · · · · · · · ·	·							
I hereby certify that the above in proper condition for transport designated as Házardous Wast	portation and Lackn	nd indicated quantity(i owledge that delivery s	ies) has (have) been accepted that be made to the facility	received and acceptor 38. AUT/JORIZED	ne above named ma SIGNATUDE	terials and indicated quantil	y (les) has (hav	e) been
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	TISME	20-	FDINFC	は	8m /0/18m2
	· · · · · · · · · · · · · · · · · · ·	NY Miner	MIPIX	i hereby certify that i	he above named ma	terials and Indicated quantit	y(ies) has (have	been .
I hereby certify that the abovin proper condition for transposesignated as Hazardous Wast	portation and Lackn	nd indicated quantity ( owledge that delivery s	ies) has (have) been accepted hail be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	ENTIFICATION
27. 2nd. TRANSPORTER (			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del>-1</del>	15. Date Accepted
			NO.				j	M / D / Y
29. AUTHORIZED SIGNA	TURE   30. 1	NAME (Print)	31. Date Accepted		<del></del>			
			M / D / Y	46. MAIL TO: Department of N			608-266-3232	1
		T 2001		Box 8094	Vaste Management [	Outside Wisconsin (	800-424-8802)	<u> </u>
		1021075	T-50 6PM	Madison, Wiscon	sin 53708	FOR DINK USE DINLY		

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

A 122040

MANIFEST NUMBER

Please type or print clearl	y using ball point	pen - press hard.	**		_			
GENERATOR (SHIPPE								
1. COMPANY NAME	II/ JCCTION	<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		<del>-, ,</del>
Milwaukee So	Trophe C	homical a	WID023350192	5, 60mmerra,				
1		nemicals	W1D023350192					
4. P.O. BOX OR STREE								
14765 W. Bob		ue						
5. CITY, STATE, ZIP CO	•		6. TELEPHONE NUMBER					
Menomonee Fa	lls, WI 53	051	(414)252-3550					
7. NUMBER & TYPE OF				10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE	13. US EPA	14. SHIPPING
CONTAINER	8. GALLONS	9	, WASTE NAME	HAZARD CLASS		(Enter number in box)		EWEIGHT (Pounds)
(1)	115 11			Flammabl	ę	1. Solid 3. Mixture	a	
( / ) Tanker	4,500	Waste Sol	vent NOS	Liquid	UN1993	2. Liquid	F003	1,500
						1. Solld 3. Mixture	וו	ŀ
						2. Liquid	٠	
						1. Solid 3. Mixture	]	
This is to certify that the ab	ove named materials	are properly classified	i, described, packaged, marked,	15. AUTHORIZED S	GNATURE	16. NAME (Print)	<del></del>	17. DATE SHIPPED
and labeled and are in prope	r condition for trans	portation according t	the applicable regulations			. , , , , , , , , , , , , , , , , , , ,		SHIPPED M D Y
of the U.S. Department of T Lalso certify that the inform			epartment of Natural Resources.	RILAY	J. X	Robert He	itzer	1913132
Table Certify that the michigan				1/ 500 00 1	1000	L	<del> </del>	
TRANSPORTED SECTI	ON.	<del></del>	<del></del>	LIAZABDOUCW	ACTE EACH ITY	CECTION		
TRANSPORTER SECTI	ON .		19. EPA IDENTIFICATION	HAZARDOUS WA		SECTION	133 EPA I	DENTIFICATION
1	, ; 	,	NO.	1			NO.	
Mr. Frank, 1	inc.		ILD069506160	American	Chemical		INDC	116360265
201 West 155					h Colfax R	oad		
21. CITY, STATE, ZIP CO	DE	······································	22. TELEPHONE NUMBER	35. CITY, STATE,	Z IP CODE		36. TELE	PHONE NUMBER
South Holla	and, Inline	ois 60473	(312-596-3377	Griffith	, Indiana		(21	9- 924-4376
23. COMMENTS		<del></del>	<u> </u>	37. COMMENTS		<del></del>		
						•		
I hereby certify that the above	ve named materials a	nd indicated quantity	(les) has (have) been accepted	I hereby certify that	the bove named ma	terials and indicated quan	tity(les) has (ha	ve) been
in proper condition for transp designated as Hazardous Wast	portation and Lackn le Facility.	owledge that delivery	shall be made to the facility	received and arcepted	SICNATURE	39 THAME (PIAN)		40. Date Accepted
24. AUTHORIZED SYNA	TURE / 25.	NAME (Print)	26. Date Accepted	مدا الك	A 11/	HUVN L	ا نسونسا	09/0782
777111111111111111111111111111111111111	milion in	1 11. 1 122	- 19/2/147	I hereby certify that received and accepted	th above named ma	terials and indicated quan	lity(ies) has (hav	re) been
I hereby certify that the above	e named materials a	nd Indicated quantity	(ies) has (have) been accepted	41. ALTERNATE H		E FACILITY NAME	42. EPA 1	DENTIFICATION
in proper condition for transp designated as Hazardous Wast	portation and Lackn	owledge that delivery	shall be inade to the facility	· <del>-</del>		-	NO.	
27. 2ng, TRANSPORTER C			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del></del>	45. Date Accepted
			NO.			, , , , , , , , , , , , , , , , , , ,		M / D / Y
29. AUTHORIZED SIGNA	TURE 130	NAME (Print)	31. Date Accepted					
	30.		M / D / Y	46. MAIL TO:		47. Emergency 24 Hour		
					latural Resources Waste Management	In Wisconsin . Outside Wisconsin	(608-266-3232 (800-424-8802	
		To 205	P 7-50	Box 8094	٠ .	FOR DNR USE ONLY	1300 424-0002	<del></del>
		10200	/~ / 30	Madison, Wiscon	sin 53708	. S. Bith OSE ONE		, j j

See reverse side, Copy 6, for instructions.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

See reverse side, Copy 6, Please type or print clearl		pen – press hard.		FORM 440	0-66	REV. 6-81,		<u> </u>	132	948	]
GENERATOR (SHIPPE	R) SECTION										
1. COMPANY NAME	· · · · · · · · · · · · · · · · · ·		2. EPA IDENTIFICATION	N NO. 3.	COMMENTS/SPE	CIAL INSTRUCTIO	NS				
Milwaukee So	lvents & C	hemicals	WID023350192	2		•					
4. P.O. BOX OR STREE		<u> </u>									}
14765 W. Bob	olink Aven	ue								•-	
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUMBER	R							
Menomonee Fa	lls, WI 53	051	(414) 252-3	3550		T	T	<del></del>	- *		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STA		13. US EPA VASTE CODE	14. SHIPPIN WEIGHT (Pour	
(/) Tanker	4,500	Waste Sol	lvent NOS		Flammable Laquid	บท1993	1. Solld 3. Mixture 2. Liquid	[4]	FD03	31,500	ږ
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							1. Solid 3. Mixture 2. Liquid		,		
			d, described, packaged, marke o the applicable regulations	ed, 15.	AUTHORIZED SI	IGNATURE	16. NAME (Print)	_		17. DATE SHIPPED	, ]
			Department of Natural Resour	rces.	Robert 7	1	Robert He	itze	er	моу	Y
also certify that the inform	nation contained her	ein is true, accurate ar	nd complete.	9	Colored A	1000	<u> </u>			11:41	
		·									
TRANSPORTER SECTI	ON					ASTE FACILITY	SECTION	2/1			
8. COMPANY NAME	•		19. EPA IDENTIFICATION		2. FACILITY NAN		3	•		ENTIFICATIO	
Mr. Frank, Inc		. 6;	1LB069506160		American (				INDO.	16360265	
0. P.O. BOX OR STREET	<del>-</del>			1 1		TREET ADDRESS	ad				
201 West 155th			22. TELEPHONE NUMBER		5. CITY, STATE,	Colfax Ro	au .		<u> </u>	HONE NUMBE	
		C0473	( 312 · 586-33		Griffith,		·			) <b>924-437</b>	- 1
South Holland,	tilinois	00473	( 312 380-33		7. COMMENTS	Indiana			1219	7324-437	
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I I I I I I I	/ 1 1	,	26. Date Accepte	.		ne above named ma	IVIVI	50		24	_
1:100 1117		4.11 11/1/2	/ <b>!-/</b>		ereby certify that ceived and accepte	ne above named ma		uantity.	(les) has (have	) Deen	_
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7. 2nd TRANSPORTER C			28. EPA IDENTIFICATION NO.	43	. AUTHORIZED S	SIGNATURE	44. NAME (Print)		4	5. Date Accept M / D / Y	
9. AUTHORIŽED ŠIĞNA	TURE 30.	NAME (Print)	31. Date Accepte M / D / Y	led 46	Department of N		47. Emergency 24 Ho In Wisconsin	(60	08-266-3232)	one Number	
					Bureau of Solid V Box 8094	Waste Management	Outside Wisconsin		00-424-8802)		
					Madison, Wiscon	sin 53708	FOR DNR USE ONL	Υ.		1	- [

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

## HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

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SENERATOR (SHIPPI	ER) SECTION								
I. COMPANY NAME	almanta e /	2h and an 1 a	2. EPA IDENTIF		3. COMMENTS/SPE	CIAL INSTRUCTIO	DN 5		
Milwaukee Se		nemicals_	WID02335	0192					
14765 W. Bol	bolink Aver	nue				•			
S. CITY, STATE, ZIP C	ODE		6. TELEPHONE						
Menomoene Fa	alls, WI500	)51	(414) 25	2-3550			,		
. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	1	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pound
/) tanker	4,500	Waste Sol	vent NOS	(	Liquid	UN1993	1. Solid 3. Mixture 2 2. Liquid	] F003	31,500
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				A.a.			1. Sollá 3. Mixture 2. Liquid	]	
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the U.S. Department of	Transportation and ti	he EPA and the Wis. I	Department of Natura	al Resources	30040	1/ 7	Robert H	eitzer	10,1 13
Iso certify that the infor	mation contained her	ein is true, accurate a	nd complete.		prove 1	TELL	<u> </u>		10/1/10
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RANSPORTER SECT	ION	<del>:</del> -	19. EPA IDENTIF		HAZARDOUS WA		SECTION	133 EPA I	DENTIFICATIO
Mr. Frank, 1	Inc.		ILD069506		American (		and a	NO.	016360265
. P.O. BOX OR STREE			225003300	7200	34. P.O. BOX OR ST			P 7   TIADO	710300203
201 West 155	oth Street			-	420 South	Colfax Ro	aď		
. CITY, STATE, ZIP CO			22. TELEPHONE	NUMBER	35. CITY, STATE, Z	IP CODE		36. TELE	PHONE NUMBER
South Hollan	nd, Illinoi	s 60473	(312)-59	96-3377	Griffith,	Indiana		( 21	924-43
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ignated as Hazardous Wa	ste Facility.			· · · · · · · · · · · · · · · · · · ·	38. AUTHORIZED		39. NAM ) 11/14	-CC	40/3/e A/cepi
AUTHORIZED SIGNA	ATURE 25	NAME (Print)	26. Date	e Accepted		The	10 111		<b>/</b> /
	<del></del>				I hereby certary that to received and accepted	ho bove named ma	terials and indicated quan		
ereby certify that the aborroper condition for transgrated as Hazardous Wa	sportation and Lackn ste Facility.	nd indicated quantity owledge that delivery	shall be made to the	facility	41. ALTERNATE H	ZARDOUS WAST	E FACILITY NAME	NO.	DENTIFICATION
2nd. TRANSPORTER		-	28. EPA IDENTIFIO	CATION	43. AUTHORIZED S	IGNATURE	44. NAME (Print)		45. Date Accepte M / D / Y
AUTHORIZED SIGNA	ATURE 30.	NAMÉ (Print) (		Accepted D / Y	46. MAIL TO: Department of Na Bureau of Solid W		47. Emergency 24 Hour In Wisconsin	(608-266-3232)	)
	•				→ Box 8094	آ ۔	Outside Wisconsin	(800-424-8802)	
			Tonna		Madison, Wiscons	In 53708	. OR DITT OUL ONE!		ļ
IAZARDOUS WA	STE FACILIT	Y	TO2107	2 1 - 3 0	1.82	Į			<b>.</b>

#### DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

# Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER



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GENERATOR (SHIPPE	R) SECTION			Br	<del></del>	•		
1. COMPANY NAME	.,,	<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		14
Milwaukee So	lvante £ (	Themicals	WID023350192	Cal.		,		
.4. P.O.IBOX OR STREET			1 111023330132	( )	4.	and the same		No.
14765 W. Bob		,	)			•		* . <del>"</del>
5. CITY, STATE, ZIP CO	OTTIN WAR	iue	6. TELEPHONE NUMBER					
· ·		2051	1					•
Menomonee Fa	118, MT 2	3021	(414) 252H3550	<del></del>	<del></del>	<del></del>		<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	<u> </u>	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STAT		14. SHIPPING EWEIGHT (Pounds)
(/) Tanker	5,000	Waste So	lvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid	2 F003	55,000
·						1. Solid 3. Mixture 2. Liquid	ם  כ	
	·		i F	1	·	1. Solid 3. Mixture 2. Liquid	]	
			d, described, packaged, marked,	15. AUTHORIZED SI	GNATURE:	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in prope of the U.S. Department of T I also certify that the inform	ransportation and t	he EPA and the Wis. D	Department of Natural Resources.	Releat H	estro	Robert Hei	tzer	10/16/81
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TRANSPORTER SECTI	ON			HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME	ON		19. EPA IDENTIFICATION	32. FACILITY NAM		32011014	33. EPA	IDENTIFICATION
Ma Bearle T			NO.				NO.	
Mr. Frank, I	IIC.		II.D069506160	American 34. P.O. BOX OR S		<del></del>	LTUDO	16360265
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201 West 155	th Street	·	22. TELEPHONE NUMBER	35. CITY STATE.	Colfax Ro	ad	7. 135 ==::	
1			1	1		•	1 .	PHONE NUMBER
South Hollan	d, Illinoi	.s 60473	(312) 586-3377	Griffith,	Indiana	<del></del>		9 <sup>)</sup> 924-4370
23. COMMENTS			Í	37. COMMENTS		ž	•	
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De la Company		N. Carlotte	[	:				~
I hereby certify that the above	re named materials a	and indicated quantity	(ies) has (have) been accepted	I pereby certify that	e above named ma	terials and Indicated qua	antity(ies) has (ha	ve) been
in proper condition for transp designated as Hazardous Wast	portation and Lackr le Facility.	lowledge that delivery	shall be made to the facility	received and accepte	IGNATURE	39_NAME (RIGH)		40. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	J. Wall	10	E-DUNKE	-	10 15 15
			M./ P. / Y./	I he not certify that treceived and accepted	he above named ma	terials and indicated qua	intity(ies) has (ha	ve) been
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27. 2nd. TRANSPORTER C		·	28. EPA IDENTIFICATION	43. AUTHORIZED	ICNATUSE 3	AA NIGHE (Delet)		AE Data Gassats
2. Zidi i Kansi On IER C	CHICAGO HAME		NO.	43. AUTHORIZED	SIGNATURE	44, NAME (Print)	ł	45. Date Accepted M / D / Y
20 41/10/01/25/05								/ _ / .
29. AUTHORIZED SIGNA	IURE 30.	NAME (Print)	31. Date Accepted	46. MAIL TO: Department of N		47. Emergency 24 Hou In Wisconsin	(608-266-3232	2)
			·	Box 8094	Vaste Management r	Outside Wisconsin	(800-424-8802	() 
		T6011	ET-SO	Madison, Wiscons	sin 53708	FOR DAR USE ONLY		1 1

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE			<del></del>					
1. COMPANY NAME	IN SECTION		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS	·	<del></del> -
Milwaukee So	lvents &	Chemicals	WID023350192					
4. P.O. BOX OR STREE								
14765 W. Bob	olink Ave	nue		٠,		•		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fai	lls, Wisc	onsin 53051	(414)-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	31,500
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid	<u> </u>	
This is to certify that the at			l, described, packaged, marked, o the applicable regulations	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
	Transportation an	d the EPA and the Wis. D	epartment of Natural Resources.	Robert 7	ety	Robert Heitz	er	12/1/8/
TRANSPORTER SECT	ION z²		7.	HAZARDOUS WA	ASTE FACILITY	SECTION		<del></del>
18. COMPANY NAME		<u> </u>	19.EPA IDENTIFICATION	32. FACILITY NAM		ocorror :		ENTIFICATION
Mr. Frank.	Inc.		ILD069506160	American C	'hemical		TNDO:	L6360265
Mr. Frank, 20. P.O. BOX OR STREE	T ADDRESS		22003300200	34. P.O. BOX OR S	TREET ADDRESS	·····	L ANDO.	- V J V V A V J
201 West 15	55th Stre	et	ł	420 South	Colfax Roa	ıd		•
21. CITY, STATE, ZIP CO		<del></del>	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE	<u> </u>	36. TELEF	HONE NUMBER
South Holla	and, Illi:	nois 60473	(312) 586-3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS				37. COMMENTS				
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						•.		
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24. AUTHORIZED SIGNA		5. NAME (Print)	26. Date Accepted		100/	Thoust	1	7/7 87
		Kind Olive M	M/P/Y	I hereby can by mat received and accepted	li above named ma	tervals and Micated quality	y(tes) has (have	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materia	is and indicated quantity	ies) has (have) been accepted	41. ALTERNATE H		E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER		_	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 3	). NAME (Print)	31. Date Accepted M / D / Y	46. MAIL TO: Department of N			608-266-3232)	one Number
		Trair	7-50 6 FW	Bureau of Solid V Box 8094 Madison, Wiscon	Vaste Management sin 53708	Outside Wisconsin (	800-424-8802)	

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

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GENERATOR (SHIPPER)	SECTION								
1. COMPANY NAME			2. EPA IDENTIFICA		3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol		Chemicals	WID023350	192	•				
4. P.O. BOX OR STREET A		VANUA		1					
5. CITY, STATE, ZIP CODE		Venue	6. TELEPHONE NUM	MBER					
Menomonee Fal		3051	(414)252-						
7 NUMBER & TYPE OF	8. GALLONS		. WASTE NAME		10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
(/) Tanker	4,500	Waste Sol	lvent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	31,500
	· /				1		1. Solid 3. Mixture		
			**				1. Solid 3. Mixture		
This is to certify that the above					15. AUTHORIZED SI	GNATURE	16. NAME (Print)	I	17. DATE SHIPPED
and labeled and are in proper co of the U.S. Department of Trar I also certify that the informati	nsportation and th	ie EPA and the Wis. C	Pepartment of Natural R		Role of 74	let .	Robert Heit:		11/10/3
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TRANSPORTER SECTION					HAZARDOUS WA	STE FACILITY	SECTION		
8. COMPANY NAME	<u> </u>		19. EPA IDENTIFICA	TION	32. FACILITY NAM		<u> </u>		DENTIFICATION
Mr. Frank, Inc	:.		10° ILD06950	2616d	American	Chemical		INDC	16360265
0. P.O. BOX OR STREET A	DDRESS				34. P.O. BOX OR \$7		<del></del>		
201 West 155th	Street		_			Colfax R	oad		
11. CITY, STATE, ZIP CODE			22. TELEPHONE NUM		35. CITY, STATE, Z			1	HONE NUMBER
South Holland,	Illinois	s 60473	(312)586-3	3377	Griffith,	Indiana		(219	924-4370
					,				
hereby certify that the above in proper condition for transportesignated as Hazardous Waste f	named materials a tation and I ackn Facility.	nd indicated quantity owledge that delivery	(ies) has (have) been acc shall be made to the fac	epted :llity	received and accepted	the pove named ma	terials and indicated quanti		e) been 40. Date Accepted
4. AUTHORIZED SIGNATU		NAME (Print)	26. Date Ad M-1/95		I herely drift that I	a are named ma	EDUVEE terials and indicated quanti	ty(les) has (hav	131082
hereby certify that the above r n proper condition for transpor esignated as Hazardous Waste F	named materials at			epted ility	41. ALTERNATE H	ZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	ENTIFICATION
7. 2nd. TRANSPORTER COL			28. EPA IDENTIFICA NO.	TION	43. AUTHORIZED S	IGNATURE	44. NAME (Print)	1	15. Date Accepted
THE THAIRST ON TEN CO									
9. AUTHORIŽED ŠIGNATU	RE 30. 1	NAME (Print)	31. Date Ad M / D		46. MAIL TO: Department of No Bureau of Solid W Box 8094	atural Resources Vaste Management		ssistance Telepi (608-266-3232) (800-424-8802)	1

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	H) SECTION			**************************************	2 0044454454545	CIAL INCTALICTIO			
1. COMPANY NAME			2. EPA IDENTIFICA		3. COMMENTS/SPE	CIAL INSTRUCTIO	145		
Milwaukee S	Solvents &	Chemicals	WID02335	0192	•				
4. P.O. BOX OR STREE	T ADDRESS								
14765 West	Bobolink	Avenue		1	•				
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NU	MBER					
Menomonee F	Talls, WI	53051	(414) - 25	2-3550				_	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
) Tanker	4,500	Waste Solve	ent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid	F003	21,500
							1. Solid 3. Mixture 2. Liquid		, 
	,						1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab and labeled and are in prope of the U.S. Department of T I also certify that the inform	r cóndition for trai ransportation and i	nsportation according to the EPA and the Wis. Do	the applicable regulat epartment of Natural F	jons	Relation		Robert Hei	tzer	17. DATE SHIPPED M D Y
TRANSPORTER SECTI	ON		19. EPA IDENTIFICA	ATION	HAZARDOUS WA		SECTION	133. EPA IC	DENTIFICATION

TRANSPORTER SECTION	:	
18. COMPANY NAME		IDENTIFICATION
Mr. Frank, Inc.	Irpo	69506160
20. P.O. BOX OR STREET ADDRESS		_
201 West 155th Street	•	•- <del></del> 6,
21. CITY, STATE, ZIP CODE	22. TEL	EPHONE NUMBER
South Holland, Illino:	Ls 60473	12 <sup>)</sup> 596-3377
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		<u>'</u>
I hereby certify that the above named material in proper condition for transportation and I ad designated as Hazardous Waste Facility.	s and indicated quantity(ies) has ( knowledge that delivery shall be n	have) been accepted; / nade to the facility
24. AUTHORIZED SIGNATURE 25	. NAME (Print)	26. Date Accepted
Michell Mate 1	MARKE PRATE	12115RZ
I hereby certify that the above named material in proper condition for transportation and I ac designated as Hazardous Waste Facility.	s and indicated quantity (ies) has ( knowledge that delivery shall be n	have) been accepted nade to the facility
27. 2nd. TRANSPORTER COMPANY NAMI	28. EPA NO.	IDENTIFICATION
29. AUTHORIZED SIGNATURE 30	. NAME (Print)	31. Date Accepted
1		M/D/Y

HAZARDOUS WASTE FACILITY	SECTION		
32. FACILITY NAME		33. EPA IDENT	IFICATION
American Chemical		INDO1636	0265
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax R	oad		
35. CITY, STATE, ZIP CODE	<del></del>	36. TELEPHON	ENUMBER
Griffith, Indiana		(219)-92	24-4370
37. COMMENTS			
	•		
	•		
I hereby certify that the above named in	aterials and indicated quant	ity(ies) has (have) bee	n
received and account	29. NAME (Print)	40.05	te Accepted
SE ASTROMENTAL STATE OF THE SECOND SE	- WANTE (FILM)	رميم استهيا	D-7
- M Million	ハトリハバた	12/	15/82
I hereby certify that the above name (in received and accepted.)	iteriais and a dictied worth	(y(les) has (have) beer	n 
41. ALTERNATE HAZARDOUS WAST	E FACILITY NAME	42. EPA IDENTI	FICATION
•	•	140.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Da	te Accepted
		м ,	, D / Y
46. MAIL TO:	47. Emergency 24 Hour A	ssistance Telephone N	lumber
Department of Natural Resources	In Wisconsin	(608-266-3232)	·
Bureau of Solid Waste Management	Outside Wisconsin	(800-424-8802)	
Box 8094	FOR DNR USE ONLY		

TO118 TR T-50 61'M 12.15.82

Madison, Wisconsin 53708

HAZARDOUS WASTE FACILITY

Se reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	RI SECTION			<del> </del>		:		<del></del>	,
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
Milwaukee Solvents & Chemicals WID023350192								{	
4. P.O. BOX OR STREET ADDRESS								J	
14765 W. Bobo		е							ļ
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER						}
Menomenee Fal	ls, WI 530	51	(414)252-3550			· · · · · · · · · · · · · · · · · · ·			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11, US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPP WEIGHT (P	
(1) Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2.	F003	33,7	50
		·				1. Solid 3. Mixture 2. Liquid			
					**.	1. Solld 3. Mixture 2. Liquid			
			, described, packaged, marked,	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPI	ED
and labeled and are in prope of the U.S. Department of T I also certify that the inform	Fransportation and th	ne EPA and the Wis. D	epartment of Natural Resources.	Robert 7	Veitre	Robert Heitze	er	5 1141	Y
<u> </u>	- 1	· · · · · · · · · · · · · · · · · · ·					<del></del>		
TRANSPORTER SECTI	ION			HAZARDOUS WA		SECTION			
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAME		33. EPA 1	DENTIFICA	TION	
Mr. Frank, Inc.  20. P.O. BOX OR STREET ADDRESS			American Chemical INDO16360265  34. P.O. BOX OR STREET ADDRESS INDO16360265			65_			
201 West 155	th Street		. 1	420 Sout	Colfax R	had			
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE	<u>ouu</u>	36. TELE	PHONE NUM	IBER
South Holland	d, IL 6047	3	(312 ) 596-3377	Griffith, Indiana (219)		)· 924-	437		
		, in the last of t	(in) by (bug) begansered	Thereby cerido that	the alwaye named ma	aterials and indicated quanti	tv(jes) has (ha	ve) been	
in proper condition for tran designated as Hazardous Wa	sportation and Lacki ste Facility,	nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received and a cepter 38. AU HORIZED	SIGNATURE	sterials and indicated quanti	3	40. Date Acc	epted
Michael Montan Michael MAKTIN 19483			I her by could y that received and accepted	he above named ma	terials and malicated quantil	y (les) Thas (hav	(e) been	25	
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	sportation and Lacki	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE	AZARDOUS WAST	E FACILITY NAME		DENTIFICAT	LION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D /	
29. AUTHORIZED SIGN.	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		iatural Resources Waste Management		ssistance Telep 608-266-3232 800-424-8802	)	,
		To 21/27	50 6PH 6.14.83	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY			

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

115628

MANIFEST NUMBER

GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 3. COMMENTS/SPECIAL INSTRUCTIONS 2. EPA IDENTIFICATION NO. Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Falls, WI 53051 414 252-3550 11. US DOT IDENTIFICATION NUMBER 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) HAZARD CLASS CONTAINER (Enter number in box) Flammable 1, Solid 3. Mixture 2 5,000 37500 Tanker Waste Solvent NOS Liquid UN1993 2. Liquid F003 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resedices. I also certify that the information contained herein is true, accurate and complete.

ļ	15. AUTHORIZED SIC	* # 4
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l	Robert	Hetz
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Robert Heitzer

16. NAME (Print)- --

	SHIP	PED
٨.	1 D	Y
.6	16	78

M , D , Y

17, DATE

1110

ILD069506160
22. TELEPHONE NUMBER (312) 596-3377

I hereby certify that the above named materials and indicated quantity(fes)	has (have) been accepted
in proper condition for transportation and I acknowledge that delivery shall	I be made to the facility
designated as Hazardous Waste Facility.	

24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
		:-

I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27.	2nd. TRANSPORTER COMPANY NA	28. EPA IDENTIFICATION NO.			
29.	AUTHORIZED SIGNATURE	30. NAME (Print)		31. Date Accepted	

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HAZARDOUS WASTE FACILITY SECTION	
32. FACILITY NAME	33. EPA IDENTIFICATION
American Chemical	INDO16360265
34. P.O. BOX OR STREET ADDRESS	
420 South Colfax Road	
35. CITY, STATE, ZIP CODE	36. TELEPHONE NUMBER
Griffith, Indiana	(219) 924-4370
37. COMMENTS	

I hereby certly in	at the above hame	d materials and indicated o	quantity(ies) has (ha	ve) been
received and accer	ģtgu	· · · · · · · · · · · · · · · · · · ·	1	
38. AUTHORIZE	DISIGNATURE	39. NAME (Print)	A STATE OF THE PARTY OF THE PAR	40, Date Accept
$\mathcal{L}$	Visilar	d materials and indicated of		M D D
-7 K	AAAA IO I		James Little	- エノスノダ

bove named materials and indicated quantity (les) has (have) been

. Actumpte incentoods was		NO.
. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708

47, Emergency 24 Hour Assistance Telephone Number

😼 In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

e reverse side, Copy 6, i ease type or print clearl				FORM 44	100.66	REV. 6-81		W TIO	023
ENERATOR (SHIPPE	R) SECTION		·						
. COMPANY NAME			2. EPA IDENTIFICATI	ON NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		<u></u>
ilwaukee Sol	vents & (	hemicals	WID023350192	2					
4765 W. Bobo							•		
CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMB						
enomonee Fal	ls, WI	3051	(414)2525-3	3550	<del></del>		T	<del></del>	
NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STAT (Enter number in box		14. SHIPPING WEIGHT (Pounds
) Tanker	5,000	Waste Sol	vent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	F003	40,000
							1. Solid 3. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid	]	
			ed, described, packaged, ma		S. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
	Fransportation an	d the EPA and the Wis. I	to the applicable regulation Department of Natural Resc and complete.		Rulent	Heitzen	Robert Hei	tzer	6 1/2/83
RANSPORTER SECTI	ION				· · · · · · · · · · · · · · · · · · ·		CECTION		
. COMPANY NAME	ION		19, EPA IDENTIFICATION	ON	HAZARDOUS WA		SECTION	33. EPA I	DENTIFICATION
	a		IDLO69506160	···				NO.	6360265
Mr.Frank, In . P.O. BOX OR STREET	T ADDRESS		присодаето	╼╼┩┝	American (	TREET ADDRESS		LTUDOT	0300203
201 West 155						Colfax Ro	a.d		
. CITY, STATE, ZIP CO	DDE	<del></del>	22. TELEPHONE NUME	BER	35. CITY, STATE,		au	36. TELE	PHONE NUMBER
South Hollan	d. TL 604	173	(312)596-33	377	Griffith,	Indiana		(219	924-4370
D. COMMENTS			·		37. COMMENTS				
receby certify that the abo	ove named inateri	als and indicated quantil	ty(ies) has (have) been accer by shall be made to the facili	pted	I hereby certify that received and accepte	the above named ma	terials and indicated qui	antity(ies) has (hav	re) been
esignated as Hazardous Wa	ste Facility.	<u></u>			38. AUTHORIZUD	SIGNATURE	39 NAME (Pril 1)	1	40. Date Accepted
AUTHORIZED SIGNA	ATURE	5. NAME (Print)	26. Date Acc		I hereby cer ity ton	thorabove manied ma	terials the indicated qua	intity(les) has (hav	6/5/83 e) been
neight certify that the aborder condition for transcriptions for the signated as Hazardous Wa	ove named materi		ty(ies) has (have) been accer y shall be made to the facili		41. ALTERNATE H	ARDOUS WAST	E FACILITY NAME	42. EPA 11 NO.	DENTIFICATION
. 2nd. TRANSPORTER	-	1E	28. EPA IDENTIFICATI NO.	ION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
. AUTHORIZEÖ SIGN	ATURE	0. NAME (Print)	31. Date Acc	epted / Y		Natural Resources Waste Management	47. Emergency 24 Hou In Wisconsin Outside Wisconsin	r Assistance Telepi (608-266-3232 (800-424-8802)	)
		7021	n.E. 7-50		Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions:

HAZARDOUS WASTE MANIFEST FORM

115630

MANIFEST NUMBER

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

See reverse side, Copy 6,	for instructions:		•	Wiscons	sin Statutes 144	REV. 6-81		<b>4 115</b>	630
Please type or print clearl	y using ball poin	t pen – press hard.		PORIVIA	1400-00	KLV.0-01			<del></del>
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION	ON NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
Milwaukee Sol		nemicals	WID023350192	}	v				
4. P.O. BOX OR STREE					· 1				
14765 W. Bobo		1e							
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBE	1				•	
Menomonee Fal	ls, WI 53	051	(414)252-35	50					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPIN EWEIGHT (Pour
// Tanker	5000	Waste Solv	vent NOS		Flammable Liquid	NA1993	1. Solid 3, Mixture 2 2. Liquid	] <sub>F003</sub>	40,000
							1. Solid 3. Mixture	וֹ	
							1: Solid 3. Mixture	]	
This is to certify that the ab					15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE
and labeled and are in prope of the U.S. Department of " I also certify that the inforr	Fransportation and	the EPA and the Wis. D	Department of Natural Reso		Retait 7	1 stre	Robert Hei	tzer	SHIPPED M D Y
<del></del>			•,	7.	<del></del>		<del></del>		<del> </del>
TRANSPORTER SECT	ION				HAZARDOUS WA		SECTION		
8. COMPANY NAME			19. EPA IDENTIFICATIONO.	DN	32. FACILITY NAM	1E		33. EPA 1 NO.	DENTIFICATIO
Mr. Frank,			XMX ILDO6950	6160	American (			INDO	6360265
20. P.O. BOX OR STREE				1	34. P.O. BOX OR 5				
201 West 15		-				Colfax Roa	<u>ad</u>		
21. CITY, STATE, ZIP CO		1 60477	22. TELEPHONE NUMB	l l	35. CITY, STATE, 2			i .	PHONE NUMBE
South Holla 23. COMMENTS	na, Illino	ois 60473	(312)-596-3	377	Griffith,	Indiana		(219	924-437
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named material	and indicated quantity	y (ies) has (have) been accep	ted	received and afcerted	the above named ma	terials and indicated quar		
					38. AUTIONIZED	SIGNALURE	39 PAME (Print)	[ ]	40. Date Accept
24. AUTHORIZED SIGN.		. NAME (Print)	26. Date Acce M / 70//		I hereby certify that i	the bove named ma	terials and indicated ghar	ntity(les) has (hav	6 278
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	sportation and 1 ac	s and Indicated quantity knowledge that delivery	shall be made to the facilit	ty	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42.EPA II NO.	DENTIFICATIO
27. 2nd. TRANSPORTER	COMPANY NAMI		28. EPA IDENTIFICATIONO.	NO	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accept M / D / Y
29. AUTHORIZED SIGN	ATURE 30	. NAME (Print)	31. Date Acce M / D /		Bureau of Solid V	latural Resources Waste Management	47. Emergency 24 Hour In Wisconsin Outside Wisconsin	Assistance Telep (608-266-3232 (800-424-8802	)
		· <del>_</del>	✓ T =		Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

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See reverse side, Copy 6, for instructions.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

115631

MANIFUST NUMBER

Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Palls, WI 53051 (414)252 - 355011. US DOT IDENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 7. NUMBER & TYPE OF 13 US FPA 14. SHIPPING 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS (Enter number in box) WASTE CODE WEIGHT (Pounds) Flammable 1. Solid 3. Mixture 2 4.500 Tanker 36 00a Waste Solvent NOS Liquid NA1993 F003 2. Liquid 1. Solid 3. Mixture 2. Llquid 1. Solid 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) This is to certify that the above named materials are properly classified, described, packaged, marked, 17. DATE SHIPPED and labeled and are in proper condition for transportation according to the applicable regulations Robert Heitzen of the U.S. Department of Transportation and the EPA and the Wis, Department of Natural Resources, RobertHeitzer 7 11218 Lalso certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 19. EPA IDENTIFICATION NO. 18. COMPANY NAME 32. FACILITY NAME 33. EPA IDENTIFICATION ILD069506160 Mr. Frank, Inc. American Cehmical INDO16360265 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 201 West 155th Street 420 South Colfax Road 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER (219.924-4370 (312) 596-3377 South Holland, IL 60473 Griffith, Indiana 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.

38. AUTHOUZED SIGNATURE

I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility pesignated as Hazardous Waste-Facility. 241 - AUTHORIZED SIGNATURE NAME (Print) 26. Date Accepted 112 183 ハカにらじその

I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

21. 2nd, TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION

29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted MIDIY

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708

I hereby certify that the above no received and accepted.

43. AUTHORIZED SIGNATURE

41. ALTERNATE HAZARDOVS WASTE FACILITY NAME

47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802) FOR DNR USE ONLY

40. Date Accepted

45. Date Accepted M , D , Y

42. EPA IDENTIFICATION NO.

39. NAME (Print)

44. NAME (Print)

TO21167-50 6RM 71283

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

Madison, Wisconsin 53708

115632

MANIFEST NUMBER

Please type or print clearl	ly using ball po	int pen – press hard.					L		<del></del>
GENERATOR (SHIPPE	R) SECTION			<del></del>				<del></del>	
1. COMPANY NAME			2. EPA IDE	NTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	lvents &	Chemicals	WIDO23	350192					
4. P.O. BOX OR STREE		011011120122	LIVEDOES	7550172					
14765 W. Bob	olink Av	מחום					· ·		
5. CITY, STATE, ZIP CO		Gride	6 TELEPH	ONE NUMBER			`•		
Menomonee Fa		52051	1	252-3550					•
Tenomonee 1a	LIS, NI	72021	1414	232-3330	<del></del>		1 <del></del>	<del></del>	T
7. NUMBER & TYPE OF CONTAINER	8. GALLON	5 9	. WASTE NA	ME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Solv	vent NOS	<b>;</b>	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	30,000
				`~			1. Solid 3. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the at					15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in propo of the U.S. Department of <sup>1</sup> Lalso certify that the inform	Transportation a	nd the EPA and the Wis. D	Department of		Robert 7	Vertra	Robert Heit:	zer	7 118 133
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<del></del>	***			, <del>, , ,</del>	<del>···_ · · · · · · · · · · · · · · · · · </del>	
TRANSPORTER SECT	ION	: auc.		<del></del>	HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME	i	<del></del>		NTIFICATION	32. FACILITY NAM	ΛE	<del></del>	33. EPA II	DENTIFICATION
Mr. Frank, Inc	<b>.</b>		NO.	506160	American	'hemies l		INDO1	6360265
20. P.O. BOX OR STREE	T ADDRESS			300100	American C	TREET ADDRESS		1=====	333323
201 West 155tl	h Street				420 South	Colfax Roa	nđ		
21. CITY, STATE, ZIP CO	DDE	<del></del>	22. TELEPH	IONE NUMBER	35. CITY, STATE, 2			36. TELEF	HONE NUMBER
South Holland	. IL 604	73	(312	596-3377	Griffith,	Indiana	-	·	
23. COMMENTS					37. COMMENTS		<del></del>		
						`.	• •	)	4700
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	isportation and I iste Facility.	acknowledge that delivery	y(ies) has (hav y shall be made	e) been accepted e to the facility	1 hereby certify that received and accepted 38. AUTHOUVED	the above named made SIGNATURE	terials and indicated qua 39. NAME (Print)		
24. AUTHORIZED SIGN	ATURE	25. NAME (Print)		M / D, / Y	I hereby details that received and accepted	his some samed ma	terials and intercate quant	in the man	160100
I hereby certify that the ab- in proper condition for tran designated as Hazardous Wa	isportation and I	lals and indicated quantity acknowledge that delivery	y (ies) has (hav y shall be made	e) been accepted e to the facility	41. ALTERNATE H	ZARDOUS WAST	E FACILITY NAME	42. EPA IL NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NA	ME .	28. EPA IDE NO.	ENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGN	ATURE	30. NAME (Print)		31. Date Accepted	Bureau of Solid	Natural Resources Waste Management		Assistance Telept (608-266-3232) (800-424-8802)	ı
		•			Box 8094		FOR DNR USE ONLY	<del></del>	

See reverse side, Copy 6, for instructions.

See reverse side, Copy 6, for instructions.

Please type or print clearly using hall point peg — press hard.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

ricase type or print clean	y using ban point	. pen – press nard.						
GENERATOR (SHIPPE	R) SECTION	<del></del>						
1. COMPANY NAME	11/ 32011011		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milsolv Com	กลทบ		2. EPA IDENTIFICATION NO. WIDO 23350172					
4. P.O. BOX OR STREE	T ADDRESS							
14765 W. Bob		 N1 <b>A</b>		1				
5. CITY, STATE, ZIP CO		·ue	6. TELEPHONE NUMBER			.•		
Menomonee Fa		2051	(414)252-3550			•		
TOTOMOTICE LA	110, 111 22	7	1411/232 3330	<del></del>	1	T	r	<del></del>
7. NUMBER & TYPE OF	8. GALLONS	9	. WASTE NAME	10. US DOT	11. US DOT	12. PHYSICAL STATE	13. US EPA	14. SHIPPING
CONTAINER		<del></del>		HAZARD CLASS	NUMBER	<del>  `</del>	WASTE CODE	E WEIGHT (Pounds
(()) mank on	4.500	Waste Solv	tont NOC	Liquid	NA1993	1. Solid 3. Mixture 2	F003	136 000
Tanker	1,0	Marce SOLV	ent nos	niguia	HVT333	2. Liquid	1003	1-70/
	1			<u>'</u>		1. Solid 3. Mixture	1	
						2. Liquid	l	
}						1. Solid 3. Mixture	1	
					<u> </u>	2. Liquid		,
This is to certify that the ab				15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y 7 /27/33
of the U.S. Department of T	Transportation and t	the EPA and the Wis. D	epartment of Natural Resources.	Robert ?	7/ 1	Robert Heit	zer	$\begin{bmatrix} M & D & X \\ 2 & 3 & 3 \end{bmatrix}$
I also certify that the inform				Ulation 1	4. Caryon	100020 11011		1161103
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TRANSPORTER SECTI	ION				ASTE FACILITY	SECTION		
18. COMPANY NAME		•	19.EPA IDENTIFICATION	32. FACILITY NAM	ΛE		I NO.	DENTIFICATION
Mr. Frank,	Inc.		ILD069506160	American (	Chemical		INDOL	.6360265
20. P.O. BOX OR STREE	T ADDRESS			34. P.O. BOX OR S	TREET ADDRESS			
201 West 15	5th Street	<u>.</u>		420 South	Colfax Ros	ad		
21. CITY, STATE, ZIP CO	DDE		22. TELEPHONE NUMBER	35. CITY, STATE,			36. TELEF	PHONE NUMBER
South Holla	nd. IL 604	73	(312-596-3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS				37. COMMENTS				
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in proper condition for tran designated as Hazardous Wa	sportation and Lack	mowledge that delivery	shall be made to the facility	received and accepted	<u>đ. – Č</u>	39. NAME (Print): A		40. Date Accepted
24. AUTHORIZED SIGNA	-	. NAME (Print)	26. Date Accepted		I SIN BEA	of the same	734	1,07,5
7011101112200101	110112	/ / · · · · · ·	M// D// Y	I hereby cortfly that	the above paged ma	terials and indicated quantit	wines has thay	مر و ا
						terials and indicated quantit E FACILITY NAME		
I hereby certify that the about proper condition for transdesignated as Hazardous Wa	isportation and Lack	and indicated quantity mowledge that delivery	y(ies) has (have) been accepted y shall be made to the facility	41. ALIERNATE II	IAZAKUU <b>u</b> 5 WA3T	E FACILITY NAME	NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
			1 100.		l		ľ	M/D/Y
29. AUTHORIZED SIGN.	ATURE 30.	. NAME (Print)	31. Date Accepted	16 MANU TO				
			M / D / Y	46. MAIL TO: Department of N	Natural Resources	47. Emergency 24 Hour As In Wisconsin (	ssistance Telept (608-266-3232)	
Ļ				Bureau of Solid	Waste Management		800-424-8802)	
		~	7 (011	. Box 8094 Madison, Wiscon	53708	FOR DNR USE ONLY		
		102114	7-50 ERAV	Madison, Wiscon	3111 33700	1		

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

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MANIFEST NUMBER

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	vents & C	hemicals	WID023350192	]				
4. P.O. BOX OR STREE				Ţ				
14765 W. Bobo	link Awen	ue						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	}				
Menomonee Fal	ls, WI 53	051	(414)252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
(1) Tanker	4,500	Waste Sol	vent NOS	Flammable Lquid	NA 1993	1. Solid 3. Mixture 2	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
			d, described, packaged, marked,	15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
and labeled and are in prope of the U.S. Department of T Lalso certify that the inform	Transportation and	the EPA and the Wis. D	epartment of Natural Resources.	Robert	Heitze	Robert Heitz	er	812483
TRANSPORTER SECTI	ION			HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME	· ·		19. EPA IDENTIFICATION	32. FACILITY NAM	1E		NO	DENTIFICATION
Mr. Frank, In	nc.		TLD069506160	American Ch	nemicals		INDO	16360265
20. P.O. BOX OR STREE	T ADDRESS			34. P.O. BOX OR S	TREET ADDRESS			
201 Nest 155	th Street			420 South (	Colfax Road	<u> </u>		
1			22. TELEPHONE NUMBER	35. CITY, STATE, 2	ZIP CODE			PHONE NUMBER
South Holland	d, IL 604°	73	(312) 596-3377	Griffith, 1	Indiana		219	924-4370
23. COMMENTS								
in proper condition for tran	sportation and Lac	s and indicated quantity knowledge that delivery	((ies) has (have) been accepted shall be made to the facility	received and a center	the above named ma	terials and indicated quantl	ty (les) has (hav	e Deen
designated as Hazardous Wa 24. AUTHORIZED SIGNA	ste Facility.	. NAME (Print)	26. Date Accepted	38. AUTHORIZED	HARRE	terials and indicated puanti	-(-/-	40. Date Accepted
		111		I hereby certify may received and accepted	the above named ma	terials and indicated puanti	ly(ies) has (hav	e) been
in proper condition for tran designated as Hazardous Wa	isportation and I ac iste Facility.	knowledge that delivery	(lies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZAMDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAM		28, EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30	). NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management	Outside Wisconsin	ssistance Telepi (608-266-3232 (800-424-8802	)
•		<u> </u>		Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard

MANIFEST NUMBER

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

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GENERATOR (SHIPPE	R) SECTION						-		
I. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
		& Chemicals	WIDO23350192						}
4. P.O. BOX OR STREE									
14765 W. Bo		Avenue					-7		-
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					ar" t	- 1
Menomonee 1	Falls, W	I 53051	(414)252-3550		····	T		<del></del>	
7. NUMBER & TYPE OF CONTAINER	8. GALLON	5 9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPIN WEIGHT (Pou	
(   ) Tanker	4,500	Waste Solv	ent NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,00	<b>)</b>
		· .	# 1			1. Solid 3. Mixture 2. Liquid			
						1. Solld 3. Mixture 2. Liquid			
This is to certify that the ab			I, described, packaged, marked,	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED	,
	Fransportation a	nd the EPA and the Wis. D	epartment of Natural Resources.	Robert 7	ecting	Robert Heit	zer	812118	×3
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TRANSPORTER SECTI	ION			HAZARDOUS WA		SECTION			
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM	1E		33. EPA II	DENTIFICATION	NG
Mr. Frank, in	nc.		ILDO69506160	American C			INDO	16360265	5
20. P.O. BOX OR STREE	T ADDRESS		*	34. P.O. BOX OR S	TREET ADDRESS				$\neg$
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21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE, Z			36. TELEP	HONE NUMBI	ĒR
South Holland	1. TT. 60	473	(312) 596-3377	Griffith,	Indiana		(219	1924-437	20 L
23. COMMENTS	4, 11 00	1/3	312 330 3377	37. COMMENTS	Indiana		227	727 737	<b>Ŭ</b>
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I become a self about the self			(ies) has (have) been accepted	I bereby certify that	the above named ma	terials and indicated quant	liv(ies) has (hav	e) been	
in proper condition for trans designated as Hazardous Wa	sportation and I	acknowledge that delivery	shall be made to the facility	received and accepted	SIGNATURE	39. NAME PMOU ! 4		49. Date Accep	igg .
24, AUTHORIZED SIGNA		25. NAME (Print)	26. Date Accepted	7 61	AL MINISTER		\$-1	M/ July	父长
	7 (	1 111 11 11	EM / P// Y	I hereby certify that	the above named vila	terials and Indicated quant	ity(ies) has (have	e) been	w
I hereby certify that the abo in proper condition for tran	ove named mater	rials and indicated quantity	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATIO	NC
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			28. EPA IDENTIFICATION NO.	TO HORIZED		, and the second		M / D /	
29. AUTHORIZED SIGNA	ATURE	30. NAME (Print)	31. Date Accepted . M / D / Y	46. MAIL TO:		47. Emergency 24 Hour A			_
			/ /	• • •	latural Resources Waste Management	In Wisconsin Outside Wisconsin	(608-266-3232)		
				Box 8094	**asie Manayement 	FOR DNR USE ONLY	(000.424.0802)		
			- EN ERILL 8005		sin 53708	I OR DINK USE DINEY		1	

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION		····			<del>,,,,,,,</del>		
i. company name Milwaukee Sol		hemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	N5		
4. P.O. BOX OR STREE  14765 W. Bobo		ue		ψ" •				
5. CITY, STATE, ZIP CO Menomonee Fal		051	6. TELEPHONE NUMBER (414 )-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds
(   ) Tanker	4,500	Waste Solv	ent NOS	Flammable Lqiuid	NA 1993	1. Solid 3. Mixture 2 2. Liquid	F003	3.6,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tran	sportation according t		15. AUTHORIZED SI	GNATURE	16. NAME (Print)  Robert Hei6	70°	17. DATE SHIPPED
I also certify that the inform	nation contained he	rein is true, accurate ar	nd complete.	noun A	estan	ky.	*C*	07/3/100
TRANSPORTER SECT	ION	<del></del>	<del>-  </del>	HAZARDOUS WA	ACTE EACH ITY	SECTION		
18. COMPANY NAME	ION		19.EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. EPA II	DENTIFICATION
Mr. Frank, In	ıC.		110069506160	American			TNDO	16360265
20. P.O. BOX OR STREE		<del></del>	11.0003300100	34. P.O. BOX OR S		···-	LINDO	10300203
201 West 155t	h Street			420 South	Colfax Ro	ađ		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE	<u> </u>	36. TELE	PHONE NUMBER
South Holland	L IL 6047	3	(312)596-3377	Griffith,	Indiana		(210	9 <sup>) -</sup> 924–4370
23. COMMENTS				37. COMMENTS	<b>A</b>			
in proper condition for tran	sportation and I aci	and indicated quantity	v(ies) has (have) been accepted shall be made to the facility	I hereby codify that received and accepte	the above named ma	terials and indicated quanti	ty(ies) has (hav	ve) been
designated as Hazardous Wa 24. AUTHORIZED SIGNA	ste Facility.	. NAME (Print)	26. Date Accepted	38. AUTHORIZED	SIGNATURE	39 DIAME Print	75	10 Date Accepted
71/19		Here of the Con	M/ 0/12	I hereby ferry that	ile above named ma	terrals and Adidated quantif	Ty lesi has (hav	e beeff
I hereby certify that the abo	ove named materials	and indicated quantity	(ins) has (have) been accepted shall be made to the facility	41. ALTERNATE	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)
	•	70	1 (AAL C 3 - 0 -	Box 8094 Madison, Wiscon	nsin 53708	FOR DNR USE ONLY		

See reverse side. Conv. 6. for instructions.

#### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

MANIFEST NUMBER

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		t pen – press hard.		FORM 4	1400-66	REV. 6-81	4	<u> </u>	
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME	.,,		2. EPA IDENTIFICAT	TION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	lvents & C	hemicals	WID02335019	2					
ENERATOR (SHIPPER) SECTION  1. COMPANY NAME  MILWAUKEE SOLVENTS & Chemicals  14765 W. Bobolink Avenue  5. CITY, STATE, ZIP CODE  Menomonae Falls, WI 53051  NUMBER & TYPE OF CONTAINER  MILWAUKEE SOLVENTS & GALLONS  NUMBER & TYPE OF CONTAINER  MINIMAL TANKER  MINIMAL TO WASTE NAME  MINIMAL TO WASTE					,				•
Milwaukee Solvents & Chemicals  4. P.O. BOX OR STREET ADDRESS  14765 W. Bobolink Avenue  5. CITY, STATE, ZIP CODE  Menomonge Falls, WI 53051  NUMBER & TYPE OF CONTAINER  NUMBER & TYPE OF CONTAINER  Tanker  Maste Solvent NOS  Naste Solvent NOS  Naste Solvent NOS  Naste Solvent NOS  Maste Solvent NO				+					
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUM	IBER					
Menomonee Fal	lls, WI 53	1051	(414)252-3	550	* 4.4				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	4	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STAT (Enter number in box		14. SHIPPING EWEIGHT (Pound
( ) Tanker	4,500	Waste So	lvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	2] F003	36,000
							1. Solid 3. Mixture 2. Liquid	]	
							1. Solid 3. Mixture 2. Liquid	]	
					IS. AUTHORIZED SI	IGNATURE	16. NAME (Print)		17. DATE SHIPPED
of the U.S. Department of	Transportation and	the EPA and the Wis.	Department of Natural Re		Robert	Heitzen	Robert Heit	tzer	11218
TRANSPORTER SECT	ION	<del></del>			LIAZA BROUG W	ACTE EACH ITY	CECTION		
	ION	<del></del>	19. EPA IDENTIFICAT	TION	32. FACILITY NAM	ASTE FACILITY	SECTION	33. FPA I	DENTIFICATION
	n a		NO.		American			I NO.	16360265
20. P.O. BOX OR STREE	T ADDRESS		[17002200T0	<u> </u>	34, P.O. BOX OR S	TREET ADDRESS		LIVIO	10300203
				1	420 South	n Colfax Ro	hađ	•	
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South Holland	d. Tr. 6047	13	(312).596-	3377	Griffith	. Indiana		(21	9-924-437
23. COMMENTS	<u> </u>	<u></u>	<u> </u>	33.7	37. COMMENTS				
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I hereby certify that the ab-	ove named material	s and indicated quanti	ty(les) has (have) been acc	epted	recolund and accords	d	terials and indicated qua	_	
					38. AUTHORIZED	SIGNATURE	39. NAME (Print)		40 Date Accepted
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1434			<del></del>				terials and indicated qua	ntity(les) has (hav	e) been
designated as Hazardous Wa	ste Facility.		ty(ies) has (have) been acc ry shall be made to the fac	epted	41. ALTERNATE H	HAZARDOUS WAST	E FACILITY NAME	42.EPA II	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICA NO.	TION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
29. AUTHORIZED SIGN	ATURE 30	NAME (Print)	M / D		Bureau of Solid	Natural Resources Waste Management	47. Emergency 24 Hour In Wisconsin Outside Wisconsin	Assistance Telep (608-266-3232 (800-424-8802	)
		To 711	6 T.50 66111		Box 8094 Madison, Wiscon	nsin 53708	FOR DNR USE ONLY	·	

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

MANIFEST NUMBER

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RATOR (SHIPPE	R) SECTION	·· <del>···········</del>		<del></del>	·			
OMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
		Chemicals	WID023350192					
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enomonee Fa	alls, WI 5	3051	(414)·252-3550					<del></del>
	8. GALLONS	9	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds
) Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	F003	36,000
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U.S. Department of 7	Transportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Robert	Heiting	Rober t He	itzer *	9 119183
			<del></del>	سعمد ا	, , , ,	I		<u></u>
NSPORTER SECT	ION	····	· · · · · · · · · · · · · · · · · · ·	HAZARDOUS W	ASTE FACILITY	SECTION		
OMPANY NAME			19. EPA IDENTIFICATION					DENTIFICATION
r. Frank In	ne. 🐪 🤚	<b>H H</b>		American	Chemical			16360265
O. BOX OR STREE	ADDRESS			34. P.O. BOX OR S	TREET ADDRESS			
				420 South	Colfax Ro	ad		
				35. CITY, STATE,	ZIP CODE		36. TELE	PHONE NUMBER
	nd, IL 604°	73	(312).596-3377		Indiana		(219	9 924-4370
COMMENTS					,			
by certify that the abo	ove named materials	and indicated quantity	(les) has (have) been accepted	I hereby whilly that	the above named ma	iterials and indicated quan	tity(ies) has (hav	e) been
ated as Hazardous Wa	ste Facility.			38. AUTIOITIZED	SCHATURE	39. NAME (Print)	7	40. Date Accepted
AUTHORIZED SIGN			26. Date Accepted	TT HILL	00/	FDVVFC		9199183
		Sec. 12. 17.	17.0	I hereby couldy this received and accepte	life above named ma d.	terials and indicated quant		
per condition for tran	sportation and Lack	and indicated quantity cnowledge that delivery	shall be made to the facility	41. ALTERNATE H	IAZARDOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION
nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
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	Tanker  To certify that the aboved and are in properties that the information for transactions are dead as Hazardous was authorized Sign.	Tanker  Tanker	ilwaukee Solvents & Chemicals  O. BOX OR STREET ADDRESS  4765 W. Bobolink Avenue  CITY, STATE, ZIP CODE  GNOMONEE Falls, WI 53051  MBBER & TYPE OF CONTAINER  Tanker  Tanker  Waste Solvents  Waste Solvents  Waste Solvents  Output that the above named materials are properly classified being and are in proper condition for transportation according to the certify that the information contained herein is true, accurate an entire true accurate and the service of the certify that the information contained herein is true, accurate and the service of the certify that the information contained herein is true, accurate and the service of the certify that the above named materials and indicated quantity per condition for transportation and I acknowledge that delivery aled as Hazardous Waste Facility.  Output Item Item above named materials and indicated quantity per condition for transportation and I acknowledge that delivery aled as Hazardous Waste Facility.  Output Item Item above named materials and indicated quantity per condition for transportation and I acknowledge that delivery aled as Hazardous Waste Facility.  Output Item Item above named materials and indicated quantity per condition for transportation and I acknowledge that delivery aled as Hazardous waste Facility.	ERATOR (SHIPPER) SECTION  COMPANY NAME  ilwaukee Solvents & Chemicals  O. BOX OR STREET ADDRESS  4765 W. Bobolink Avenue  CITY, STATE, ZIP COUE  CONOMONE Falls, WI 53051  MBER & TYPE OF  CONTAINER  Tanker  Tanker  Waste Solvent NOS  Waste Name  Waste Solvent NOS  Waste Solvent NOS  Waste Solvent NOS  Waste Solvent NOS  Waste Solvent NOS  Waste Solvent NOS  It certify that the above named materials are properly classified, described, packaged, marked, beled and are in proper condition for transportation according to the applicable regulations upon the solvent not remained of Transportation and the EPA and the Wis. Department of Natural Resources. Certify that the information contained herein is true, accurate and complete.  NSPORTER SECTION  COMPANY NAME  T. Frank Inc.  SO BOX OR STREET ADDRESS  OI West 155th Street  CITY, STATE, ZIP CODE  Outh Holland, II. 60473  COMMENTS  ON Certify that the above named materials and indicated quantity (les) has (have) been accepted per condition for transportation and I acknowledge that delivery shall be made to the facility alted as Hazardous Waste Facility.  Doy certify that the above named materials and indicated quantity (les) has (have) been accepted per condition for transportation and I acknowledge that delivery shall be made to the facility alted as Hazardous Waste Facility.  Walther Richardous Waste Facility.  25. NAME (Print)  26. Date Accepted  M / O   / O   / O   / O    Condition for transportation and acknowledge that delivery shall be made to the facility alted as Hazardous Waste Facility.  AUTHORIZED SIGNATURE  25. NAME (Print)  26. Date Accepted  M / O   / O   / O    Condition for transportation and acknowledge that delivery shall be made to the facility alted as Hazardous Waste Facility.  28. EPA IDENTIFICATION  28. EPA IDENTIFICATION  28. EPA IDENTIFICATION	ENATOR (SHIPPER) SECTION  COMMANY NAME  I WAUKEE SOLVENTS & Chemicals  A765 W. Bobolink Avenue  CONTRINER  A765 W. Bobolink Avenue  CONTRINER  B. GALLONS  O WASTE NAME  I D. US DOT HAZARD CLASS  Flammable  Liquid  I D. US DOT HAZARD  I D. US DOT HAZARD  I D. US DOT HAZARD  I D. US DOT HAZAR	Tanker 7.500 Waste Solvent NOS  To certify that the above named materials are properly classified, described, packaged, marked, period at are in proper condition for transportation and the Far and the wire, securate and complete.  **SPORTER SECTION**  **O.BOX OR STREET ADDRESS**  **O.BOX OR STREET ADDRESS**  **D. WASTE NAME**  **D. Waste Solvent NOS  **IDO23350192**  **O. BOX OR STREET ADDRESS**  **D. Waste Solvent NOS  **IDO23350192**  **IDO23350192**  **O. BOX OR STREET ADDRESS**  **D. Waste Solvent NOS  **IDO33050000000000000000000000000000000000	Tanker   Commons   Commo	type or print clearly using ball point per — press hard.  EARTOR (SIPIPPER) SECTION  OMPANY NAME  A Chemicals  WIDO23350192  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET ADDRESS  A 10. US DOT STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STREET STRUCTIONS  INTO STRUCTIONS  INTO STREET STRUCTIONS  INTO STRUCTIONS  INT

Box 8094

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

MANIFEST NUMBER

Please type or print clearly		pen - press hard.		FORM 44	100-66	REV. 6-81	Ĺ	Α .	TTO	
GENERATOR (SHIPPE	B) SECTION									
1. COMPANY NAME	,		2. EPA IDENTIFICATION	ON NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .			
Milwaukee Sol	vents & Ch	emicals	WIDO23350192	2						
4. P.O. BOX OR STREE		<u></u>								
14765 W. Bobo	link Avenu	ıe		1.						
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUMB	ER						
Menomonee Fal	ls, WI 530	51	(414) 252-35	550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	, 9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STA (Enter number in bo		US EPA TE CODE	14. SHIPPING WEIGHT (Pound
(1) Tanker	11) 11500		vent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid	2 <sub>F</sub>	003	36,000
							1. Solid 3. Mixture 2. Liquid			
				٤.			1. Solid 3. Mixture 2. Liquid			
This is to certify that the ab					5. AUTHORIZED SI	GNATURE	16. NAME (Print)			17. DATE SHIPPED
and labeled and are in proper of the U.S. Department of T I also certify that the inform	Transportation and t	he EPA and the Wis. D	epartment of Natural Reso	s ources.	Robert	Hetax	Robert He	itzer		7126123
					<del></del>					
TRANSPORTER SECT	ION		19.EPA IDENTIFICATION		HAZARDOUS WA		SECTION		3 600 15	ENTIFICATION
			NO.					33. EPA IDENTIFICATION NO. INDO16360265		
Mr. Frank, I	nc.		TTDO69506160		American 34, P.O. BOX OR S	Chemical	<del></del>		TNDOT	6360265
ł				244			- •			
201 West 155	oth Street	<u>.</u>	22. TELEPHONE NUMB	<del>E B -</del>	420 South 35. CITY, STATE, 2	COLIAX RO	ad	130	6 TELEP	HONE NUMBER
1				1 1					(219) 924-4370	
South Hollan	10, LL 604/	3	(312)596-33	<i>3.1.1</i>	Griffith, Indiana 219					924-43/1
I hereby certify that the abin proper condition for trandersted as Hazardous Wa	isportation and Lack	and indicated quantity nowledge that delivery	r(ies) has (have) been accer shall be made to the facili	oled ity -	Thereby centil that receive hand ceteber 38. AUTHORSE	the above named ma	aterials and indicated qu	uantity(les)	has (have	e) beën 0. Date Accepted
24. AUTHORIZED SIGNA	ATURE 125.	NAME (Print)	26. Date Acc			11 56	T V	ت ماسا	.	919418
The state of the s		Marin 19 19	9/49/		I hereby certify that received and accepte 41. ALTERNATE H	he apolinamed ma	terials and morcated ou	antity(ies)	has (have	been
I hereby certify that the abi in proper condition for train designated as Hazardous Wa	isportation and Lack iste Facility.	and indicated quantity nowledge that delivery	shall be made to the facili	ty .	1				NO.	ENTIFICATION
27. 2nd. TRANSPORTER			28, EPA IDENTIFICATI NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)			M / D / Y
29. AUTHORIZED SIGN	ATURE 30.	NAME (Print)	31. Date Acc		Bureau of Solid	Natural Resources Waste Management	47, Emergency 24 Ho In Wisconsin Outside Wisconsin	(608-2	ce Teleph 66-3232) 24-8802)	one Number
		70210	KT-50 6RM 9.26.	·§3	Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONL			

MANIFEST NUMBER

14. SHIPPING WEIGHT (Pounds)

(219)-924-4370

42. EPA IDENTIFICATION NO.

See reverse side, Copy 6, for instructions.			HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM:4400-66 REV. 6-81				A 11	5640	
Please type or print clear	ly using ball point	pen - press hard.				<u>L</u>			
GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .			
Milwaukee Solvents & Chemicals   WID			WID023350192	1					
4. P.O. BOX OR STREE		·		· ·				•	
14765 W. Bob	olink Aven	ue		:					
5. CITY, STATE, ZIP C	ODE		6. TELEPHONE NUMBER	1					
Menomonee Falls, WI 53051			(414 )252-3550						
7. NUMBER & TYPE OF CONTAINER				10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STA		A 14. SHIPPING DE WEIGHT (Pound	
(1) Tanker 4,500 Wa		Waste Sol	Waste Solvent NOS		NA1993	1. Solld 3. Mixture 2. Liquid	2 <sub>F003</sub>	36,000	
						1. Solid 3. Mixture 2. Liquid			
						1. Solid 3. Mixture 2. Liquid			
			1, described, packaged, marked,	15. AUTHORIZED S		16. NAME (Print)		17. DATE SHIPPED	
and labeled and are in prop of the U.S. Department of lalso certify that the infor	Transportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Robert 7	1 c-then	Robert Hei	tzer	M D Y 12.7183	
			ب موب	· · · · · · · · · · · · · · · · · · ·	5	1 :			
TRANSPORTER SECT	ION				ASTE FACILITY	SECTION			
18. COMPANY NAME 19.EPA IDENTIFICATION				32. FACILITY NAME 33. EPA IDENTIFICATION					
Mr. Frank, Inc. ILD069506160				American Chemical INDO16360265					
				34. P.O. BOX OR S	TREET ADDRESS				
201 West 1	55th Street	<b>L</b>		420 South	Colfax Roa	ıd			
21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER				35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER					

THANSION EN SECTION							
18. COMPANY NAME		19.EPA ID	ENTIFICATION				
Mr. Frank, Inc.			69506160				
20. P.O. BOX OR STREET ADDRESS							
201 West 155th Str	eet						
21. CITY, STATE, ZIP CODE		22. TELEF	HONE NUMBER				
South Holland, IL	60473	(31)	2)596-3377				
23. COMMENTS	· · · · · · · · · · · · · · · · · · ·	<u> </u>					
·			•				
I hereby certify that the above named mate							
in proper condition for transportation and designated as Hazardous Waste Facility.	I acknowledge that delivery	y shall be ma	de to the facility				
24. AUTHORIZED SIGNATURE	25. NAME (Print)		26. Date Accepted				
111 11 11 11 11 to	11/20 11 1111		713717				
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.							
27. 2nd. TRANSPORTER COMPANY N	AME	28. EPA IL NO.	DENTIFICATION				
29. AUTHORIZED SIGNATURE	30. NAME (Print)		31, Date Accepted M / D / Y				
	I		l				

43.	AUTHORIZED SIGNATURE
46.	MAIL TO:
	Department of Natural Resources
	Bureau of Solid Waste Management
	Box 8094
	Madison, Wisconsin 53708

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME

Griffith, Indiana

37. COMMENTS

44. NAME (Print)	45. Date Accepted
47. Emergency 24 Hour In Wisconsin	Assistance Telephone Number (608-266-3232)
Outside Wisconsin	(800-424-8802)
FOR DNR USE ONLY	

See reverse side, Copy 6, for instructions.

Wisconsin Statutes 144 FORM 4400-66

115641

MANIFEST NUMBER

HAZARDOUS WASTE MANIFEST FORM REV. 6-81

riease type or print cleari	A nzing pari botu	t pen – press nard.					<u> </u>	·	
GENERATOR (SHIPPE	R) SECTION			·					
1. COMPANY NAME			2. EPA II	DENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Miwwaukee Solvents & Chemicals   WID023350192				23350192	1.4				
4. P.O. BOX OR STREET ADDRESS									
14765 W. Bob	olink Ave	กบอ		·					
5. CITY, STATE, ZIP CO			6. TELE	HONE NUMBER			÷		
Menomonee Fa		2051		4) 252-3550					
rienomonee ra	118, 111 3	3031	1 , 41	47232-3330				<del></del>	<del></del> -
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE N	IAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/) Tanker	4500	Waste Sol	.vent N	os	Flammable Liguid	NA1993	1. Solid 3. Mixture 2	F003	36,000
							1. Solid 13. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab and labeled and are in prope					15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPEU
of the U.S. Department of T Laiso certify that the inform	ransportation and	the EPA and the Wis.	Department i	of Natural Resources.	Relant 7	Leitze	Robert Heit:	ter	7/28/83
						SCP .			
TRANSPORTER SECTI	ON				HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME	,		193EPA IC	ENTIFICATION	32. FACILITY NAM	E ,	181	33. EPA ID	ENTIFICATION
Mr. Frank, I	nc.			59506160	American (	Chemical		INDOL	6360265
					American (	REET ADDRESS		, <del> </del>	
201 West 155	th Street			.:	420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO	DDE		22. TELE	PHONE NUMBER	35. CITY, STATE, Z	IP CODE		36. TELEP	HONE NUMBER
South Holland, IL 60473			(31:	2)596-3377	Griffith, Indiana (219) 924				924-4370
23. COMMENTS					37. COMMENTS				
I hereby certify that the abo in proper condition for tran	sportation and Lac	s and indicated quant knowledge that delive	ity(ies) has (h rv shall be ma	ave) been accepted ide to the facility	received and accepted	the above named ma	iterials and indicated quanti	ty(ies) has (have	e) been
designated as Hazardous Wa	ste Facility.	-			38. AUTHORIZED	SIGNATURE	39. NAME (Print)	[4	O. Date Accepted
24. AUTHORIZED SIGNA	ATURE 25	NAME (Print)		26. Date Accepted	I A AV	B. J. J. J. J.	1-1/A/1-	<u> </u>	9118181
100 100 1900 ×	1000	Burn Carlo III	A, 2.279	71.9710			terials and indicated quantil	lÿ(ies) has (have	e) been
I hereby certify that the about proper condition for tran- designated as Hazardous Wa	ove named material sportation and I ac ste Facility.	s and indicated quant knowledge that delive	ity(ies) has (h ry shall be ma	ave) been accepted ide to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA ID NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA I NO.	DENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGN.	ATURE 30	. NAME (Print)		31. Date Accepted M / D / Y	Bureau of Solid	atural Resources Waste Management	Outside Wisconsin	ssistance Teleph (608-266-3232) (800-424-8802)	
		'	,	-641	Box 8094	rin 53708	FOR DAR USE ONLY		

TURITED GEM

HAZARDOUS WASTE FACILITY

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION	<del></del>						
1. COMPANY NAME			2. EPA IDENTIFICATION NO	. 3. COMMENTS/SPE	CIAL INSTRUCTIO	ONS		
Milwaukee Sol		nemicals	WIDO23350192					
4. P.O. BOX OR STREE								
14765 W. Bobo		ue						
5. CITY, STATE, ZIP CO		253	6. TELEPHONE NUMBER					
Meenomonee Fal	18, WI 53	751	(414) 252-3550	<u>, </u>	<sub>1</sub>	<del></del>		<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
( ) Tanker	4,500	Waste Solv	net NOS	Flammable Liquid	N#1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certily that the ab			d, described, packaged, marked,	15. AUTHORIZED S	IGNATURE	16. NAME (Print)		17. DATE SHIPPED
	Fransportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Robert"	Hatre	Robert Heit:	zer	M D Y
TRANSPORTER SECT	ION	<del></del>		HAZARDOUS W		SECTION		
18. COMPANY NAME		<del></del>	19. EPA IDENTIFICATION	32. FACILITY NAM		<del></del>	33. EPA II	DENTIFICATION
Mr. Frank, Ir	nc.		ILD069506160	American 34. P.O. BOX OR S	Chemical			016360265
201 West 155t	<del>-</del>				Colfax Ro	oad		
21. CITY, STATE, ZIP CO		_	22. TELEPHONE NUMBER	35. CITY, STATE,				PHONE NUMBER
South Holland	I, IL 6047	3 	(312)596-3377	Griffith,	Indiana		(219	9)-924-4370
I hereby certify that the abo in proper condition for train designated as Hazardous Wa	sportation and Lack	and indicated quantity mowledge that delivery	v(ies) has (have) been accepted v shall be made to the facility	I hereby certify that received and accrate 38. AUTHORITED	the above pamed man	aterials and Indicated quanti	ty (ies) has (hav	(e) been 40. Date Accepted
24. AUTHORIZED SIGN.		NAME (Print)	26. Date Accepted M / D / Y	I hereby certify that received and accepte	the ay ve named ma	aterials and indicated quantit	y (ies) has (hav	e) been
I hereby certify that the about the proper condition for transdesignated as Hazardous Wa	ove named materials	and Indicated quantity	(ies) has (have) been accepted of shall be made to the facility			E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION
27. 20d. TRANSPORTER		<del></del>	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
29. AUTHORIZED SIGN	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		sistance Telept 608-266-3232) 800-424-8802)	)
		To	210 KT.50 62M 9.	29.5 3 Madison, Wiscon	nsin 53708	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

MANIFEST NUMBER

115644

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81 Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	RI SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
Milwaukee Sol	vents & C	hemicals	WIDO23350192					
4. P.O. BOX OR STREE	T ADDRESS			•				
14765 W. Bobo	link Aven	ue						•
5. CITY, STAFE, ZIP CO			6. TELEPHONE NUMBER			· -		
Menomonee Fal	ls, WI 53	051	(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Solv	rent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	30,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solld 3. Mixture 2. Liquid		
This is to certify that the ab			, described, packaged, marked,	15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED M D Y
	Fransportation and	the EPA and the Wis. De	epartment of Natural Resources.	Robert 4	city	Robert Heit:	zer	10/11/23
TRANSPORTER SECT	ION			HAZARDOUS WA	CTE EACH ITY	SECTION:	<del></del>	
18. COMPANY NAME	.,	**	19.EPA IDENTIFICATION	32. FACILITY NAM		3ECTION .	33. EPA II	DENTIFICATION
Mr. Frank, In	C.	,	ILDO69506160	American	Chemical		NO.	6360265
20. P.O. BOX OR STREE	T ADDRESS		120003300100	34. P.O. BOX OR S			LINDOI	CVAVOCO.
201 West 155t	h Street			420 South	Colfax Ro	að		ł
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUMBER	35. CITY, STATE, 2	IP CODE	<u> </u>	36. TELE	HONE NUMBER
South Holland	. Tllinoi	s 60473	(312)596-3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS		<del></del>		37. COMMENTS				72. 7010
-		÷				•		
I hereby certify that the abo	ove named material	s and indicated quantity	(ies) has (have) been accepted shall be made to the facility	I hereby certify that	the above named ma	sterials and indicated quanti	ty(ies) has (hav	e) been
designated as Hazardous Wa	ste Facility.			Jeceived and accepted	SIGNATURE	39. NAME (Print)	مدينين	M. D. ( Y.
24. AUTHORIZED SIGN	· !	i, NAME (Print)	26. Date Accepted M / D / Y	H	ussee	1-11/11/re	<u>: (                                   </u>	11/1/2
I hereby certify that the about proper condition for tran	eve named material sportation and Lac		(ies) has (have) been accepted shall be made to the facility	received and accepted	AZAI BOUS WAST	terials and indicated quanti E FACILITY NAME	42. EPA IL NO.	DENTIFICATION
designated as Hazardous Wa 27. 2nd, TRANSPORTER	· · ·	· E	28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del></del>	15. Date Accepted
			NO.			' '		M / D / Y
29. AUTHORIZED SIGN	ATURE 30	). NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	)
			_	Box 8094 Madison, Wiscon	-	FOR DIR USE ONLY		

122057-50 GKW 10.11.83

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

115645

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GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME	——————————————————————————————————————		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sov	lents & Ch	<u>lemicals</u>	WID023350192	·				
14765 W. Bobo								
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fal	ls. WI 530	)51	(414)-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	1	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number lii box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4500	Waste Solv	vent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tran Fransportation and t	sportation according to he EPA and the Wis. D	epartment of Natural Resources.	Robert 7		Rubert He	itzer	17. DATE SHIPPED M D Y
,'		\$(**\d')		<b>€</b> .		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del></del>
TRANSPORTER SECTI	ION		,	HAZARDOUS WA		SECTION		
18. COMPANY NAME 19. EPA IDENTIFICATION NO.				32. FACILITY NAM	NE		33. EPA II	DENTIFICATION
Mr. Frank, In	c.		ILDO69506160	American			INDO	16360265
		d.		34. P.O. BOX OR S	TREET ADDRESS			ļ
201 West 155t	h Street	·			Colfax Ro	ad		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,			i	PHONE NUMBER
South Holland	l, Illinois	60473	(312)596-3377	Griffith,	Indiana			924-4370
				Thereby could be the	The shows somed	terials and indicated quanti	ly/fact has firm	(e) Naco
I hereby certify that the about proper condition for tran- designated as Hazardous Wa	sportation and Lack	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received and accepte	SIGNATURE	391 NAME (Print)		40; Date Accepted
24. AUTHORIZED SIGN	ATUBE 25.	NAME (Print)	26. Date Accepted	i hereby certify that received and accepte	My Qui	terials and Indicated quantil	ty(les) has (hav	e) been
1 hereby certify that the about in proper condition for transdesignated as Hazardous Wa	ove named materials sportation and Lack	and indicated quantity	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H		E FACILITY NAME	42. EPA IL NO.	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHÖRIZED SIGN.	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	)
		TOZINE T	-50 GEM 9.30.83	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard. HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81 MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION	N NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sc		Chemicals	WIDO23350192						
4. P.O. BOX OR STREE									
14765 W. Bot		nue							
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBE	- 1					
Menomonee Fa	lls, WI 53	3051	(414)-252-35	50		····			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	بير	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Sol	vent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture 2	PÓ03	36,000
		i					1. Solid 3. Mixture 2. Liquid		
	•			•			1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab and labeled and are in prope	r condition for Wans	portation according to	the applicable regulations		15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
of the U.S. Department of T Falso certify that the inform	ransportation and th	e EPA and the Wis. De	epartment of Natural Retou	rces.	Robert	H. to	Robert Heitz	er.	12/13/23
						······································			
TRANSPORTER SECTI	ON		19. EPA IDENTIFICATION		HAZARDOUS WA		SECTION	- 133 - 53 - 1	DENTIFICATION
			NO.	`	1		<b>\</b>	NO.	
Mr. Frank, Ir 20. P.O. BOX OR STREET	IC.		ILD069506160		American C	Chemical		LINDO	16360265
							•		
201 West 155t	ode Street	<del></del>	22. TELEPHONE NUMBE	R	420 South	COLIAX ROA	<u>.a '</u>	36. TELEF	HONE NUMBER
South Holland		,	(312)· 596-3					1 .	924-4370
23. COMMENTS	11 0041		312 330-3	3//	Griffith. 37. COMMENTS	THUTGHA			9 929-9310
I hereby certify that the abo in proper condition for trans	sportation and Lackin	ind indicated quantity lowledge that delivery	(les) has (have) been accepte shall be made to the facility	ed	received and accepted	the above named ma	terials and indicated quantil		10. Date Accepted
designated as Hazardous Was	ATURE 25.	NAME (Print)	26. Date Accep		I Sind	DOI	39. NAME (Print)	year.	1213183
I hereby certify that the about no proper condition for train designated as Hazardous Wa	eve named materials a	and indicated quantity	(ies) has (have) been accepte	ed	41. ALTERNACE H	d			DENTIFICATION
27. 2nd. TRANSPORTER	-		28. EPA IDENTIFICATIO NO.	N	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	-1	15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accep	ted Y	Bureau of Solid	latural Resources Waste Management		sistance Telept 608-266-3232) 800-424-8802)	
HAZARDOUS W	. • ለወጥድ <u>ይ</u> ለ <i>ሮ</i> ፤፤፤ነ	. To212	JET-SO SRW 12:13:83		Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

## MANIFEST NUMBER

## STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

116157

GENERATOR (SHIPPE	RISECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		
Milwaukee So		& Chemicals	WIDO23350192	·				1
4. P.O. BOX OR STREE								
14765 W. Bob	oolink A	venue .	۱ ۰ ۰					
5. CITY, STATE, ZIP CO		······································	6. TELEPHONE NUMBER					1
Menomonee Fa	alls, WI	53051	(414)252-3550		_			
7. NUMBER & TYPE OF CONTAINER	8. GALLON	S 9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	1.000	Waste Sol	vent NOS	Flammable Liquid	ил1993	1. Solid 3. Mixture Z 2. Liquid	F003	//
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	r condition for	transportation according t	d, described, packaged, marked, o the applicable regulations Department of Natural Resources.	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
Lalso certify that the inform	nation containe	herein is true, accurate ar	nd complete.	ممني إساد	and the second	Robert Heitz	er	1416 K
					•			
TRANSPORTER SECTI	ON			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NA	<del></del>		33. EPA 10 NO.	DENTIFICATION
Mr. Frank, In	ic.		ILD069506160	Amer'	al			16360265
20. P.O. BOX OR STREE	T ADDRESS	· · · · · · · · · · · · · · · · · · ·		<del>-</del>	DRESS			
201 West 155t	th Stree	t		( , , )	Roa	ad	•	•
21. CITY, STATE, ZIP CO		<del></del>	22. TELEPHONE NUME	1500			36. TELEF	HONE NUMBER
South Holland	1. TL 60	473	(312)-596-31	1			(219	9-924-4370
23. COMMENTS		<del></del>						
1			1					
					. —			
			*					
			··· . ].					
I hereby certify that the abo	we named mate	rials and indicated quantity	y(ies) has (have) been accepted	hereby certify that	the above named ina	iterials and indicated quanti	ty(les) has (hav	e) been
in proper condition for trans designated as Hazardous Wa	sportation and I	acknowledge that delivery	shall be made to the facility	received and accepted	d. 🖈	39. NAME (Print)		O. Date Accepted
24. AUTHORIZED SIGNA		25. NAME (Print)	26. Date Accepted	1.4 1.	· adle	T N/I A FT		M11411 C)
	, ,	· · · )	/M1//O1/Y	I bereby centry that	he shove named ma	tenals and midicated quantil	Vijes) bas (bave	heen w
		· · · · · · · · · · · · · · · · · · ·		received and accepted	AZABDOUS WAST	E EACH ITY NAME	42 500 15	ENTIFICATION
in proper condition for tran- designated as Hazardous Wa	sportation and l ste Facility.	acknowledge that delivery	y (ies) has (have) been accepted y shall be made to the facility				NO.	
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGNA	ATURE	30. NAME (Print)	31. Date Accepted	46. MAIL TO:		47. Emergency 24 Hour A	ssistance Teleni	iona Number
			M / D / Y	Department of N	latural Resources	In Wisconsin	(608-266-3232)	
<b></b>		·		Bureau of Solid ' Box 8094	Waste Management		(800-424-8802)	
		710	57-50 GRM	Madison Wiscon	sin 53708	FOR DNR USE ONLY		1

12-16-53

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

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116177

MANIFEST NUMBER

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION					;		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol		Chemicals	WIDO23350192					
4. P.O. BOX OR STREE				••				
14765 W. Bobo		ue (				<i>i</i>		- [
5. CITY, STATE, ZIP CO		1.0	6. TELEPHONE NUMBER			1		l
Menomonee Fal	lls, WI 5	3051	(414)-252-3550			;		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Sol	vent NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2 2. Liquid	F003	40,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the abland labeled and are in prope				15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
	ransportation and	the EPA and the Wis. D	epartment of Natural Resources.	Robert H	eit,	Robert Heitz	er	10/17/83
				44		ه دمــــــــــــــــــــــــــــــــــــ	1	
TRANSPORTER SECTI	ON	·		HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION NO.	32. FACILITY NAM			NO.	ENTIFICATION
Mr. Frank Inc			ILDO69506160	American C	hemical	······································	INDO	L6360265
201 West 155t	n Street		22. TELEPHONE NUMBER	420 South		aa .	136 TELED	HONE NUMBER
1				1				924-4370
South Holland	1, 11, 604	3	(312) 596-3377	Griffith,	Indiana		, 213	924-43/0
								}
·			·					
ļ								1
I hereby certify that the abo	ve named materia	s and indicated quantity	(ies) has (have) been accepted	Thereby certify that received and accepte		iterials and indicated quantit	y(ies) has (have	e) been
designated as Hazardous War	sportation and Lac ste Facility,	knowledge that delivery	shall be inade to the facility	38. AUTHORIZED	SIGNATURE	39. NAME (Print)	4	0. Date Accepted
24. AUTHORIZED SIGNA	ATURE 2	. NAME (Print)	26. Date Accepted	1-1.1.1	مستفرهر كمورا والمارا	EDIME	3.50	16/87/83
Linear Street		Will I live	549191	I hereby certify that received and accepte	the above named ma	terials and indicated quantit	y(ies) has (have	e) been
t hereby certify that the abo in proper condition for tran- designated as Hazardous Wa	ove named materia sportation and I ac ste Facility.	s and Indicated quantity knowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H			42. EPA IC	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAM		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		5. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30	). NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		isistance Teleph 608-266-3232) 800-424-8802)	one Number
				Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY	<u>-</u>	

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

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(	_	)
$\mathbf{C}$	_	7

GENERATOR (SHIPPE	R) SECTION						···	
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwakkee Sol		hemicals	WID023350192			<u>.</u>		
4. P.O. BOX OR STREE						1		:
14765 W. Bobo		ue				•	,	
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fal	lls, WI 530	051	(414 )252-3550			·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSIGAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4.500	Waste Solv	ent NOS	Flammable Liquid	NA1993	1. Solid) 3. Mixture 2	F003	35,000
						1. Solid 3. Mixture 2. Liquid		
				`		1. Solid 3. Mixture 2. Liquid	- p-1 - T	.X.
and labeled and are in prope	er condition for trans Fransportation and ti	sportation according to he EPA and the Wis, D	o the applicable regulations epartment of Natural Resources.	Refert 9	GNATURE	Robert Heit	zer	17. DATE SHIPPED M D Y 10/1//33
				38		·		
TRANSPORTER SECTI	ION			HAZARDOUS WA				
18. COMPANY NAME :		-	19. EPA IDENTIFICATION	32. FACILITY NAM	AE.		33. EPA I NO.	DENTIFICATION
Mr. Frank, Ir	nc.		ILDO69506160	American C	Chemical		INDO	16360265
l .		6.		34. P.O, BOX OR S				
201 West 155t	th Street			:420 South	Colfax Roa	ıd		S. C. C. C. C. C. C. C. C. C. C. C. C. C.
		S.	22. TELEPHONE NUMBER					HONE NUMBER
South Holland	1, II, 6047:	3	(312) 596-3377	Griffith,	Indiana			9 924-4370
23. COMMENTS		pro s	· '	37. COMMENTS				
		6		İ				
		2 4 F						
							•	
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Thereby certify that the abo	ove named materials	and indicated quantity	(ies) has (have) been accepted	I hereby of hily that	tienbove named ma	terials and indicated quanti	ty(ies) has (hav	e) been
In proper condition for tran designated as Hazardous Wa	sportation and I ack ste Facility.	nowledge that delivery	shall be made to the facility	received and accepte	SIGNATURE	39 NAME (Print)	- Angele	40. Date Accepted
24. AUTHORIZED SIGNA	ATURE 25.	NAME (Print)	26. Date Accepted	HI MAN	188/	1-11/1/1/11	ーは	111/19/82
1111 1111111		March State	~ 1/6/19 831	Thereby berkity that received and accept	the above named ma	terials and introaved quantit	y(ies) has (hav	· · · · · · · · · · · · · · · · · · ·
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named materials sportation and Lack	and indicated quantity	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATO	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telep 608-266-3232 800-424-8802	)
		-		Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		
HAZARDOUS WA	ASTE FACILI	762101 TY	£7-50 6PM 10.19.83					

See reverse side, Copy 6, for instructions.

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

A 116179

MANIFEST NUMBER

179

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
Milwaukee Se	olvents &	Chemicals	WID023350192				•	
4. P.O. BOX OR STREE	T ADDRESS		J					
14765 W. Bol	bolink Ave	nue	į					
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUMBER					
Menomonee Fa	alls, Wisc	onsin53051	(414-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	36,000
					: ` `	1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid	\- <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	
				15 AUTHORIZED SI		16. NAME (Print)	<del></del>	17. DATE SHIPPED
and labeled and are in proportion the U.S. Department of Talso certify that the inform	Fransportation and	the EPA and the Wis. D	o the applicable regulations epartment of Natural Resources.	Robert 7	cityen	Robert Het.	204	10,21,83
	<u> </u>							
TRANSPORTER SECT	ION			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM			NO.	ENTIFICATION
Mr.Frank, I	nc.		ILD069506160	American C		<u> </u>	INDO	L6360265
20. P.O. BOX OR STREE				34. P.O. BOX OR S				
201 West 15				420 South	Colfax Roa	ıd		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE, 2				HONE NUMBER
South Holla	nd, Illino	is 60873	(312) 596~3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS				37. COMMENTS				
			1					
		•	į	•				
			1	ĺ			•	
I nereby certify that the abo	ove named material	s and indicated quantity	(les) has (have) been accepted shall be made to the facility	I hereby certify that	the above named ma	terials and indicated quantil	ly(ies) has (have	e) been
designated as Hazardous Wa	ste Facility.	knowledge that delivery	shan be made to the facility	received and accepted		39. NAME (Print)		O. Date Accepted
24. AUTHORIZED SIGN	/	. NAME (Print)	26. Date Accepted	1 F. Siste	122	トンレハド5		(M)/20/1/Yes
111 11/10	万、 10	Marie Barrell	Mag1123	I hereby certify that	the above named ma	terials and indicated quantit	y(ies) has (have	e) been
In proper condition for tran	hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.				AZARDOUS WAST	E FACILITY NAME		ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5. Date Accepted M / D / Y
29. AUTHORIZED SIGN	D. AUTHORIZED SIGNATURE   30. NAME (Print)   31. Date Ac				latural Resources Waste Management		isistance Teleph 608-266-3232) 800-424-8802)	one Number
				Box 8094	62709	FOR DNR USE ONLY		

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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

Please type or print clearl	ly using ball poi	nt pen – press hard.				<u></u>		
GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · · ·					·
1. COMPANY NAME	, -4511611		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	olvents &	Chemicals	WIDO23350192					
4. P.O. BOX OR STREE  14765 W. Bol		enue						
5. CITY, STATE, ZIP CO	ODE .	<del></del>	6. TELEPHONE NUMBER					
Menomonee Fa	alls, WI	53051	(414 )252-3550			•		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING EWEIGHT (Pounds
(1) Tanker	4,500	Waste Sol	lvent NOS	Flammable Liquid	NA 1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tr	ansportation according	ed, described, packaged, marked, to the applicable regulations Department of Natural Resources.	Robert	•	16. NAME (Print)	<i>F</i> -	17. DATE SHIPPED M D Y
Laiso certify that the inform	nation contained	<del></del>		7 7 5	14.6.172	Rubert Her	1200	11/4/83
TRANSPORTER SECT	ION	<del></del>	<del></del>	HAZARDOUS WA	STE EACH ITY	SECTION .		<u> </u>
18. COMPANY NAME	1011		19. EPA IDENTIFICATION	32. FACILITY NAM		SECTION	33. FPA I	DENTIFICATION
Mr. Frank, In	nc.		ILD069506160	American	Chemical		NO.	16360265
20. P.O. BOX OR STREE				34. P.O. BOX OR S		<del></del>		20300203
201 West 155	th Street			420 South	Colfax Ro	ad		
21. CITY, STATE, ZIP CO	ODE		22. TELEPHONE NUMBER	35. CITY, STATE, 2			36. TELE	PHONE NUMBER
South Holland	l, Illino	is 60473	(312)596-3377	Griffith,	Indiana		(21:	9-924-4370
23. COMMENTS		•		37. COMMENTS	_			
			ĺ	1		•		
			<u> </u>					
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I hereby certify that the abo	ove named materia	als and Indicated quantit	ty(ies) has (have) been accepted	I neceby certify that	in above named ma	iterials and Indicated quant	lity(ies) has (has	e) been
in proper condition for train designated as Hazardous Wa	isportation and La sste Facility.	cknowledge that deliver	y shall be made to the facility	18. A)ThORITE	SINATURE	39. THAME (PAIN)	· ····································	40. Date Accepted
24. AUTHORIZED SIGN		5. NAME (Print)	26. Date Accepted	Hum		1 WIL	にピー	M12183
11/11/11/11		The I dill	// M/20 123	I hereby cutify that received and accepte	he above named ma	terial and indicated quant	ity(les) has (hav	e) been
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	isportation and La	als and indicated quantilicknowledge that deliver	ty (ies) has (have) been accepted by shall be made to the facility	41. ALTERNATE	AZARDOUS WAST	E FACILITY NAME	42.EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAM	1E	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE	O. NAME (Print)	31. Date Accepted		latural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Telep (608-266-3232 (800-424-8802	)
_		Tanı	6 T 50	, Box 8094 Madison, Wiscon	-	FOR DNR USE ONLY	(800-424-8802	,

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### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

Please type or print clearl	y using ball po	oint pen – press hard.						<del></del>
GENERATOR (SHIPPE	R) SECTION					₹.		
1. COMPANY NAME	<del></del>		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		
Milwaukee Solver	its & Chian	icals	WID023350192	*** N				
4. P.O. BOX OR STREE		<del></del>	<del></del>					
14765 W. Bobolin		•			•			
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Falls,			(414 ) - 252-3550					
Talking Talls,	117 22027	, <sub>1</sub>	(414 /- 232-3330	<del></del>	1	<del></del>	- <del></del>	<del></del>
7. NUMBER & TYPE OF CONTAINER	8. GALLON	s	. WASTE NÄME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1)	11			Flammable		1. Solid 3. Mixture 2	İ	10,
( / Tanker	4500	Waste Solv	rent NOS	Liquid	NA1993	2. Líquid	F003	36,000
				4.		1. Solid 3. Mixture 2. Liquid		
·						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for- Fransportation a	transportation according ( nd the EPA and the Wis, I	ed, described, packaged, marked, to the applicable regulations' Department of Natural Resources, and complete.	15. AUTHORIZED SI		Robert Heitze	r	17. DATE SHIPPED M D Y
			•			· · · · · · · · · · · · · · · · · · ·		
TRANSPORTER SECTI	ON ,	,	791	HÁZÁRDOUS W	ASTE FACILITY	SECTION		
18. COMPANY NAME	- 4		19, EPA IDENTIFICATION	32. FACILITY NAM	ΛE.		33. EPA II NO.	DENTIFICATION
Mr.Frank, Inc.			110069506160	American Cha	mical		INDOL	6360265
20. P.O. BOX OR STREE	T ADDRESS		7	34. P.O. BOX OR S	TREET ADDRESS			
201 West 155th S	Street			420 South Col	lfax Road			
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,			36. TELEI	PHONE NUMBER
South Holland, I	llinois 6	0473	( 312 )596-3377	Griffith, Inc	liana	•	(210	924-4370
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		• * •	TU1178 T-50	Box 8094 Madison, Wiscon	<del>-</del>	FOR DNR USE ONLY		

HAZARDOUS WASTE MANIFEST FORM

MANIFEST NUMBER

116190

Wisconsin Statutes 144 FORM 4400-66 See reverse side, Copy 6, for instructions. REV. 6-81 Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION		······································		······································	<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
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4. P.O. BOX OR STREE								
14765 W. Bobo		ле	6. TELEPHONE NUMBER					
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Menomonee Fal	1s, W1 530	75.1	(414) 252-3550	<del></del>	11 US DOT	<del> </del>	·	<del></del> -
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	) v 4 9.	. WASTE NAME	LO. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/) Tanker	4,500	Waste Solv	vent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
				15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
	Transportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Robert 7	10:1-	Robert Heitz	er	11,23,83
I also certify that the inforr	nation contained he	rein is true, accurate an	d complete.	Violen /	7. clissen			16-5103
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TRANSPORTER SECT  18. COMPANY NAME	ION		19. EPA IDENTIFICATION	HAZARDOUS WA		SECTION	33 500 0	DENTIFICATION
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South Hollar	d. TI. 604	73 👙	(312)596-3377	GMAFfiths	Indiana		219	924-4370
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29. AUTHORIZED SIGN	ATURE 30	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telepi (608-266-3232 (800-424-8802)	)
		_	_	Box 8094	52700	FOR DNR USE ONLY		

See reverse side. Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

116191

MANIFEST NUMBER

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Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals
4. P.O. BOX OR STREET ADDRESS WID023350192 14765 W. Bobolink Avenue 5. CITY, STAFE, ZIP CODE 6. TELEPHONE NUMBER 414-252-3550 Menomonee Falls, WI 53051 11. US DOT DENTIFICATION NUMBER 10. US DOT 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME HAZARD CLASS WASTE CODE WEIGHT (Pounds) CONTAINER (Enter number in box) Flammable 1. Solid 3. Mixture 2 36,*00*0 Waste Solvent NOS Tanker Liquid NA1993 F003 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) 17. DATE SHIPPED This is to certify that the above named materials are properly classified, described, packaged, marked. and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. Robert Heitzer I also certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 32, FACILITY NAME 18. COMPANY NAME 19. EPA IDENTIFICATION 33. EPA IDENTIFICATION American Chemical
34. P.O. BOX OR STREET ADDRESS INDO16360265 Mr. Frank, Inc.
20. P.O. BOX OR STREET ADDRESS ILDO69506160 201 West 155th Street 420 South Colfax Road 35. CITY, STATE, ZIP CODE 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER South Holland, IL 60473 <sup>(</sup> 312<sup>)-</sup>596~3377 <sup>(</sup> 219<sup>-</sup>924-437¢ Griffith, Indiana 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and ascepted. I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and Lacknowledge that delivery shall be made to the facility 40. Date Accepted designated as Hazardous Waste Facility. 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted I hereby certify that the apove named materials and indicated quantity(les) has (have) beer received and accepted. 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted m proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 27. 2nd. TRANSPORTER COMPANY NAME 28, EPA.IDENTIFICATION NO. 43. AUTHORIZED SIGNATURE 44. NAME (Print) . 45. Date Accepted M / D / Y29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 47. Emergency 24 Hour Assistance Telephone Number MIDIY Department of Natural Resources In Wisconsin -(608-266-3232) (800-424-8802) Bureau of Solid Waste Management Outside Wisconsin TO 212 F.T-50 6/EM 12.2.83 Box 8094 FOR DNR USE ONLY Madison, Wisconsin 53708

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION							***************************************
I. COMPANY NAME Milwaukee So	lvents &	Chemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	ns		
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			ed, described, packaged, marked, to the applicable regulations	15. AUTHORIZED S	-	16. NAME (Print)		17. DATE SHIPPED
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9. AUTHORIZED SIGN	ATURE	30. NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management	47. Emergency 24 Ho In Wisconsin	(608-266-3232	?)
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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

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FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION							·		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	N5		·.		
Milwaukee Sc	lvents &C	hemicals	WID023350192					· ·		
4. P.O. BOX OR STREE	TADDRESS							$\P$		
14765 W. Bob	olink Aver	nue	·					9		
5. CITY, STATE, ZIP CO	DE		6. TELEPHONE NUMBER							
Menomonee Fa	lls, WI 5	3051	414)-252-3550							
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds)		
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Mr. Frank, I	nc.		19.EPA IDENTIFICATION		Chemical			16360265		
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				Box 8094	usin E 2709	FOR DNR USE ONLY				
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### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

Madison, Wisconsin 53708

FOR DNR USE ONLY

MANIFEST NUMBER

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See reverse side, Copy 6, for instructions. V FORM 4400-66 REV. 6-81 Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Falls, WI 53051 (414)-252-355011. US DOT DENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 7. NUMBER & TYPE OF 13. US EPA 14. SHIPPING 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS (Enter number in box) WASTE CODE WEIGHT (Pounds) Flammable 1. Solld 3. Mixture 2 4,500 Waste Solvent NOS Liquid Tanker UN1993 F003 2. Llauid 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) 17. DATE This is to certify that the above named materials are properly classified, described, packaged, marked, SHIPPED and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. Robert Heitzer I also certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION ILD069506160 American Chemical Mr. Frank, Inc. INDO16360265 20. P.O. BOX OR STREET AUDRESS 34. P.O. BOX OR STREET ADDRESS 201 West 155th Street 420 South Colfax Road 21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER (312)596-3377 South Holland, Illinois 60473 Griffith, Indiana <sup>(</sup>219)-924-4370 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity(ies) has (have) been I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted received and accepted.

38. AUTHORIZED SIGNA in proper condition for transportation and I acknowledge that delivery shall be made to the facility 39. NAME (Print) 40. Date Accepted designated as Hazardous Waste Facility. 24. \ AUTHORIZED SIGNATURE 26. Date Accepted 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 21. 2nd. TRANSPORTER COMPANY NAME 28, EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y31. Date Accepted 29. AUTHORIZED SIGNATURE 30. NAME (Print) 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M / D / Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802) Box 8094

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard. HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

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Menomonee F	alls. Wisc	onsin 53051	414-252-3550					
7. NUMBER & TYPE OF	8. GALLONS	· ·	WASTE NAME	10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE	13. US EPA	A 14. SHIPPING DEWEIGHT (Pound
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TRANSPORTER SECT	ION			HAZARDOUS W		SECTION		<del></del>
18. COMPANY NAME	<b>-</b>		19. EPA IDENTIFICATION NO.	32. FACILITY NAM			33. EPA NO.	IDENTIFICATION
Mr. Frank,			ILD069506160	American	Chemical		IND	016360265
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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

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GENERATOR (SHIPPER) SECTION

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1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So		hemicals Co	rp WIDO23350102					,
4. P.O. BOX OR STREET		ue						,
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER			•		
Menomonee Fa	lls, WI 53	851	(414)- 252-3550	·				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	4,500	Waste So	lvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture Z 2. Liquid	F003	33,750
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	Tna (		ILDO69506160	American	•		i NO	
Mr. Frank, 20. P.O. BOX OR STREET	TADDRESS		110009306160	34. P.O. BOX OR S			TWDC	16360265
201 West 15			1	1	Colfax Ro	n.a		ł
21. CITY, STATE, ZIP CO	DE SCREEC	•	22. TELEPHONE NUMBER	35. CITY, STATE,		au	36. TELEF	HONE NUMBER
South Holla	nd TT. 604	73	(312)596-3377	Griffith,				924-4370
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24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	I hereby certify Wat received and accepted	the above named ma	terals and indicated quantil	y (ies) has (have	-3 1 /b 183
I hereby could that the about the proper condition for transdesignated as Hazardous Wa	ve named materials a sportation and I ackr	and indicated quantity	(ies) has (have) been accepted	41. ALTERNATE H			42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	•		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	1
		Top	110 KT-50	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		
HAZARDOUS WA	ASTE FACILIT	Y C	SRM 3.1083	-				

## HAZARDOUS WASTE MANIFEST FORM

140434

MANIFEST NUMBER

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION		·						
1. COMPANY NAME	-		2. EPA IDENTIFICATION	NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee S	olvents &	Chemicals	WID023350192						
		:	· · · · · ·	74	· ·				
14765 W. Bo	DOLLINK AV	Buna	6. TELEPHONE NUMBER			•		**	
Menomonee F			(414)252-355	0	S-07				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Sol	vent NOS	- 4	Flammabl Liquid	e UN1993	1. Solld 3. Mixture 2 2. Liquid	F003	33,750
							1. Soild 3. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab			i, described, packaged, market	d, l	5. AUTHORIZED S	IGNATURE	16. NAME (Print)		17. DATE SHIPPED
	Transportation and	the EPA and the Wis. D	epartment of Natural Resource	ces.	Robert !	Heitzen	Robert Heit	zer	3,2483
	4	•							
TRANSPORTER SECT	ION		? 			ASTE FACILITY	SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION NO.		32. FACILITY NAM		,	33. EPA II NO.	DENTIFICATION
Mr. Frank, I 20. P.O. BOX OR STREE	nc.		ILD06950 <b>5</b> 16	0	American 34. P.O. BOX OR S	Chemical		INDO	16360265
							5		
201 West 155			22. TELEPHONE NUMBER		35. CITY. STATE.	Colfax Ro	<u>aa</u>	36. TELER	HONE NUMBER
South Hollan		72	1 312 596-33	1 1	Griffith.	•		I .	9 924-437
23. COMMENTS	u, 11 004	<i>,</i>	312 390-33	<u></u>	37. COMMENTS	Indrana			9 924-43/
				.					
			^				•		
					•				
1									
I in proper condition for tran	sportation and I ac	s and indicated quantity knowledge that delivery	(ies) has (have) been accepted shall be made to the facility	-	I hereby certify that received and accepte 38. AUTHOR ZED	the above named ma	terials and Indicated quanti		
designated as Hazardous Wa		, NAME (Print)	26. Date Accepte	4	38. ACTHORIZED	SIGNATURE		77	10.03 12/25 S
michilon		Mikel Mit	15 31228	3	I hereby certify that received and accepte	thrybove named ma	terials and indicated quantit	y(ies) lias (have	e) been
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named material	s and indicated quantity	(ies) has (have) been accepted shall be made to the facility			HAZARDOUS WAST	E FACILITY NAME	42. EPA IE NO.	DENTIFICATION
27. 2nd. TRANSPORTER		<u> </u>	28. EPA IDENTIFICATION NO.		43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	15. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30	NAME (Print)	31. Date Accepti			Natural Resources		608-266-323?	}
Laurence			507 50		Box 8094	Waste Management	Outside Wisconsin (	800-424-8802)	<u> </u>
		7,521	0 R7-50		Madison, Wiscon	nsin 53708	: : =: = <b>==</b> =:.= •		1 1

GRW 3.22 83

### ...CUNSIN .. NATURAL RESOURCES

REV. 6-81

MANIFEST NUMBER

140435

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME	· · · · · · · · · · · · · · · · · · ·		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		
Milwaukee Sol	vents & Ch	emicals	WID023350192	••				
4. P.O. BOX OR STREE	T ADDRESS			#				
14765 W. Bobo	link Avenu	l <b>e</b>				•		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fal	ls, WI 530	51	(414)-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds)
(/) Tanker	4,500	Waste Solv	rent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2	F003	33,750
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab			·	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	,	17. DATE SHIPPED
of the U.S. Department of T t also certify that the inform	ransportation and th	ie EPA and the Wis. D	epartment of Natural Resources.	Rollant 7	/ eitin	Robert Heitz	er'	1311 हेड
TRANSPORTER SECTI	ON			HAZARDOUS WA		SECTION	122	
1	•		19.EPA IDENTIFICATION NO.	32. FACILITY NAM			NO.	DENTIFICATION
Mr. Frank, 20. P.O. BOX OR STREE	Inc.		ILD069506160	American	Chemical	<del></del>	INDO.	16360265
201 West 15	Sth Street		22. TELEPHONE NUMBER	35. CITY, STATE,	h Colfax F	<u>ka</u>	36 7515	PHONE NUMBER
1								
South Holla	nd, IL 604	1/3	312 596-3377	37. COMMENTS	, Indiana	<del></del>	\ 21	9 9 24 - 4 3 7 0
								, ,
I hereby certify that the abo	ve named materials	and indicated quantity		I hereby Cy that	t above named in	aterials and Indicated quantit	y (les) has (hav	ve) been
in proper condition for tran- designated as Hazardous Wa	sportation and I ack ste Facility.	nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received a la conte	SCNATULE	39. NAME (Print)		40. Date Accepted
24. AUTHORIZED SIGN	ATURE 25.	NAME (Print)	26. Date Accepted	I hereby cyrthy iffat received and accepted	the shove named ma	TED VICE Attention of the state	y(ies) has (hav	3/3/83
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named inaterials sportation and Lack	and indicated quantity	(ies) has (have) been accepted shail be made to the facility	41. ALTERNATE H		E FACILITY NAME	42.EPA I	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		sistance Telep 608-266-3232 800-424-8802	!)
			FT-50	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

## HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

riease type or print cleari	y using ban point	pen - press nard.				1				
GENERATOR (SHIPPE	R) SECTION									
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	N\$				
Milwaukee Sol		nicals	WIDO23350192							
4. P.O. BOX OR STREE  14765 W. Bobo		•,						•		
5. CITY, STATE, ZIP CO		<u> </u>	6. TELEPHONE NUMBER			•				
Menomonee Fal		L	(414) - 252–3550							
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds		
(1) Tanker	4,500	Waste Solven	t NOS	Liquid UN1993 1. Solid 3. Mixture 2 F003 33,73						
<u>C)</u>						1. Solid 3. Mixture 2. Liquid				
						1. Solid 3. Mixture 2. Liquid				
			, described, packaged, marked,	15. AUTHORIZED S	GNATURE	16. NAME (Print)		17. DATE SHIPPED		
and labeled and are in prope of the U.S. Department of T Lalso certify that the inform	Transportation and	the EPA and the Wis. D	epartment of Natural Resources.	Robert 7	letra	Robert Heitze	r	2,88,83		
TRANSPORTER SECT	ION '		<del></del>	HAZARDOUS W	ASTE FACILITY	SECTION	· · · · · · · · · · · · · · · · · · ·			
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM	ИE	<del></del>	33. EPA 10	ENTIFICATION		
Mr. Frank, In	c.		1120069506160	American C	hemical		INDO16	360265		
20. P.O. BOX OR STREE	T ADDRESS			34. P.O. BOX OR S	TREET ADDRESS		. <u> </u>			
201 West 155t	h Street			420 South	Colfax Road					
21. CITY, STATE, ZIP CO	DDE		22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		36. TELEF	HONE NUMBER		
South Holland	, IL 50473		( 312) - 596–3377	Griffith,	Indiana		(219	924-4370		
in proper condition for tran designated as Hazardous Wa	sportation and Laci ste Facility.	and indicated quantity knowledge that delivery	(les) has (have) been accepted shall be made to the facility	I hereby certify that received and accepte 38. AUTHARIZED	the above named made. SIGNATURE	39. NAME (Print)		10. Date Accepted		
24. AUTHORIZED SIGN	ATURE 25	NAME (Print)	26. Date Accepted	lifereby certify that	the abrive named ma	Igliais aiyu indicaled quaint	ly (tes) has (have	M 3023		
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named materials sportation and I acluste Facility.	and indicated quantity knowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	IAZARDOUS WAST	E FACILITY NAME	42. EPA IC NO.	ENTIFICATION		
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5. Date Accepted		
29. AUTHORIZED SIGN.	ATURE 30	. NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management	Outside Wisconsin	ssistance Telepi (608-266-3232) (800-424-8802)	one Number		
		702107	ET.50 G/H 2.28.83	Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY				

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

Department of Natural Resources

Madison, Wisconsin 53708

Box 8094

Bureau of Solid Waste Management

In Wisconsin

FOR DNR USE ONLY

Outside Wisconsin

(608-266-3232)

(800-424-8802)

REV. 6-81

GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · · ·					
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	lvents & Cl	nemicals	WID023350192					(
4. P.O. BOX OR STREE								
14765 W. Bob	olink <mark>Aven</mark>	ue					•	
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER					
Menomonee Fa	lls, Wisco	nsin 53051	( 414-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2 2. Liquid	F003	33,75c
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
				15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in proper of the U.S. Department of Talso certify that the inform	Fransportation and th	ie EPA and the Wis. D	epartment of Natural Resources.	Robert 7	4 citys	Robert Heitz	er	4,11,83
						· · · · · · · · · · · · · · · · · · ·		
TRANSPORTER SECTI	ION			HAZARDOUS WA				
18. COMPANY NAME	_	•	19:EPA IDENTIFICATION NO.	32. FACILITY NAM		r de la companya de l	NO.	DENTIFICATION
Mr. Frank,	Inc.	<u> </u>	ILDO69506160	American C			INDO	16360265
1 .			,	;		_		
201 West 15	oth Street	·	22. TELEPHONE NUMBER	35. CITY, STATE, 2	Colfax Roa	id	156 7616	PHONE NUMBER
			1 · .	1				_
South Hollar	na, IIIIno:	LS 604/3	312) 596-3377	Griffith,	Indiana	-	\ \ 21	9-924-4370
		+ 4	y	- ,				
in proper condition for tran designated as Hazardous Wa	sportation and Lacki ste Facility.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	Thereby burtify that received at Laccepte 38. 107+ DRIZED		terials and indicated quantil		40. Date Accepted
24. AUTHORIZED SIGN		NAME (Print)	26. Date Accepted	I heleby certify that received and accept	ie above named ma	terials and indicated quantil	y(ies) has (hav	4/19/83
I hereby certify that the about in proper condition for transdesignated as Hazardous Wa	ove named materials a sportation and Lacki	and Indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30.	NAME (Print)	31. Date Accepted	AS MAIL TO:		A7 F 041:		

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

MANIFEST NUMBER

140439

See reverse side, Copy 6, for instructions.

rlease type or print cleari	y using ball point	pen — press nard.				<u> </u>		
GENERATOR (SHIPPE	R) SECTION			****				
1. COMPANY NAME Milwaukee So	olvents &	Chemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE		NS		
4. P.O. BOX OR STREE  14765 W. Bol		nue		Sec. 4		•		
5. CITY, STATE, ZIP CO		3051	6. TELEPHONE NUMBER  ( 414 - 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	II. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( / ) Tanker	5,000	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solld 3. Mixture 2	F003	27,500
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tran Fransportation and t	sportation according to he EPA and the Wis. D	epartment of Natural Resources.	15. AUTHORIZED SI	•	Robert Heit	zer	17. DATE SHIPPED M D Y
TRANSPORTER SECT	ION			HAZARDOUS WA		SECTION		
18. COMPANY NAME	COMPANY NAME 19. EPA IDENTIFICATION NO.			32. FACILITY NAME 33. EPA IDENTIF			•	
Mr. Frank, Ir	ic.		ILDO69506160	American	Chemical		INDO	.6360265

i		1	2. Liquia ——	L	_1
This is to certify that the above named materials are proper		15. AUTHORIZED SIGNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in proper condition for transportation a of the U.S. Department of Transportation and the EPA and		120 151 1			MDY
I also certify that the information contained herein is true,		Klist Heits	Robert Heit	zer	7115183
			<del></del>		
TRANSPORTER SECTION		HAZARDOUS WASTE FACILITY	SECTION		
18. COMPANY NAME	19. EPA IDENTIFICATION	32. FACILITY NAME		33. EPA NO.	IDENTIFICATION
Mr. Frank, Inc.	ILD069506160	American Chemical	•		16360265
20. P.O. BOX OR STREET ADDRESS		34. P.O. BOX OR STREET ADDRESS			
201 West 155th Street		420 South Colfax R	oađ		
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE	××××	36. TELE	PHONE NUMBER
South Holland, IL 60473	(312)596-3377	Griffith, Indiana		(21	9 924-4370
23. COMMENTS		37. COMMENTS			J. J. J. J. J. J. J. J. J. J. J. J. J. J
·					
		\			
		Thereby certify that the above named in	aterials and indicated quanti	lulies) has the	vel heen
I hereby certify that the above named materials and indicate in proper condition for transportation and I acknowledge the	ad quantity(ies) has (have) been accepted lat delivery shall be made to the facility	received and accorded.  38. AUTHORIZED SIGN TURE	120 ALONE TIO	.y (163) 1183 (118	40. Date Accepted
designated as Hazardous Waste Facility.  24. AUTHORIZED SIGNATURE 25. NAME (Pr.	int) 26. Date Accepted	38. ALTHURIZED SIGNATURE	11/1/11/11/11		# 1/5 1873
1 11 1	Corrected My PCI SE	I hereby termy that we above named m		williage) has the	
Just Buren Mill		received and accept V.	· · · - · · · · · · · · · · · · · ·		
I hereby certify that the above named materials and indicate in proper condition for transportation and I acknowledge the designated as Hazardous Waste Facility.	ed quantity(ies) has (have) been accepted hat delivery shall be made to the facility	41. ALTERNATI JAZARDOUS WAS	TE FACILITY NAME	NO.	IDENTIFICATION
27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.	43. AUTHORIZED SIGNATURE	44. NAME (Print)		45. Date Accepted
}		,		1	M / D / Y
29. AUTHORIZED SIGNATURE 30. NAME (Pr		46. MAIL TO:	47. Emergency 24 Hour As	ssistance Teler	shone Number
	M / D / Y	Department of Natural Resources	In Wisconsin (	(608 <b>-</b> 266-3232	2)
	. :	Bureau of Solid Waste Management Box 8094	· · · · · · · · · · · · · · · · · · ·	800-424-8802	··)
	Ta 21/ T-50	Madison, Wisconsin 53708	FOR DNR USE ONLY		

## DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

MANIFEST NUMBER

Wisconsin Statutes 144 FORM 4400-66 Please type or print clearly using ball point pen - press hard

·	. •							
GENERATOR (SHIPPE	R) SECTION				<del></del>		<del></del>	· · · · · · · · · · · · · · · · · · ·
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	N5		
Milwaukee Sol		nemicals	WID023350192					
4. P.O. BOX OR STREET								
14765 W. Bobo		ue						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					.5.
Menomoneee Fa	alls, WI 5	3051	(414) 252-3550				· · · · · · · · · · · · · · · · · · ·	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	5000	Waste So	lvent NOS	Flammable Liquid	UN1993	1. Solld 3. Mixture 2	F003	37,500
		÷				1. Solid 3. Mixture 2. Liquid		
-		,	ν			1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	r condition for trans ransportation and th	portation according to se EPA and the Wis, D	epartment of Natural Resources.	15. AUTHORIZED SI		Robert Heitz	er	17. DATE SHIPPED
		,	',	113				
TRANSPORTER SECTI	ON		^	HAZARDOUS W		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM	ΛE.	•	33. EPA 1 NO.	DENTIFICATION
Mr. Frank			ILD069506160	. American	Chemical		INDO	16360265
20. P.O. BOX OR STREE				34. P.O. BOX OR S				
	155th Stree	et		420 South	n Colfax Ro	oad		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,				PHONE NUMBER
South Hol	land, IL 6	0473	( 312)· 596-3377	Griffith	<u>Indiana</u>		21	9 924-4370
						, <del>†</del> ***		
in proper condition for trans	sportation and Lacki	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received and accepte		terials and Indicated quanti		
designated as Hazardous Was	ATURE 25.	NAME (Print)	26. Date Accepted	38. AUT 17	WYOU	DVNT		40. Date Accepted
Mr. A. X.		ACT RED DOLL		I hereby cellify that received and accepte	d. <u>4</u>		ty(les) has (hav	
designated as Hazardous Was	ste Facility.	and Indicated quantity bwledge that delivery	(les) has (have) been accepted shall be made to the facility			E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	·	1 1 m	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin	ssistance Telep (608-266-3232 (800-424-8802	)
		To 211	K T-50 GRY	Box 8094 Madison, Wiscor	isin 53708	FOR DNR USE ONLY		

4.22.83

## DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

MANIFEST NUMBER

140442 Δ

Please type or print clearl	y using ball po	int pen – press hard.		FORM	4400-66	REV. 6-81	•		140	776
GENERATOR (SHIPPE		<del></del>		<del></del>						
1. COMPANY NAME		<del> </del>	2. EPA ID	ENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS			
Milwaukee 4. P.O. BOX OR STREE	Solvents	& Chem	WIDO2	3350192						
14765 W. B	•	Avenue								
5. CITY, STATE, ZIP CO			6. TELEP	HONE NUMBER			•			
Menomonee	Falls, W	I 53051	( 404	)- 252-3550						<u> </u>
7. NUMBER & TYPE OF CONTAINER	8. GALLON		, WASTE NA	AME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL S		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
(   ) Tanker	+,500	Waste So	olvent	NOS	Flammable Liquid	UN1993	1. Solid 3. Mixtu 2. Liquid	ure 🔼	<b>b</b> F00	333,750
							1. Solid 3. Mixtu 2. Liquid	ure 🔲		
							1. Solid 3. Mixtu 2. Liquid	لــا		
This is to certify that the ab and labeled and are in prope of the U.S. Department of 1 Lalso certify that the inform	er condition for l Fransportation a	ransportation according t nd the EPA and the Wis. C	o the applical Department of	ole regulations	R.C. A	•	Rubir	•	citzer	17. DATE SHIPPED M D Y ン/ゴ/どろ
				i		<del></del>		_	٠	
TRANSPORTER SECT	ION		lia coa io	ENTIFICATION	HAZARDOUS WA		SECTION	<del>-</del> -	/	
	T		NO.	69506160	1				/ /	5.
Mr. Frank			1100	93200190	American			_	•	S ~
201 West		reat			1	Colfax Ro	a.đ			700
21. CITY, STATE, ZIP CO		1666	22. TELEP	HONE NUMBER	35. CITY, STATE,		,-	_		-0
South Hol	land. II.	60473	(31	2 - 596 - 3377	Griffith,	Indiana	•			
23. COMMENTS		,.		2 050 3511	37. COMMENTS	Ziidzuiid		<u>!</u>		٠.
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I hereby certify that the abo	sportation and I	ials and indicated quantit acknowledge that deliver	y(ies) has (ha y shall be mad	ve) been accepted le to the facility	I hereby cottly that received ung a cepte	the above named ma	iterials and indicate	o quanti	ty(ies) has (hav	e) Deen
designated as Hazardous Wa	ste Facility.	25, NAME (Print)		26. Date Accepted	38. AUTIVORIZED	SONATURE	39 NAME/7 X	IZ		Accepted
Town best 1/19 it	, ,	Down 11/54	17	M / P / Y	I herrby certify that received and accept	the above named ma	terials and indicate	d quanti	(V(les) has (have	a) been
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named mater sportation and I ste Facility.	ials and Indicated quantit acknowledge that deliver		i		HAZARDOUS WAST	E FACILITY NAM	1E.	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NA	ME	28. EPA 10 NO.	ENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print	)	4	M / D / Y
29. AUTHORIZED SIGN	ATURE	30. NAME (Print)		31. Date Accepted M / D / Y	46. MAIL TO: Department of I	Natural Resources	47. Emergency 24 In Wisconsin		ssistance Telept (608-266-323?)	

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION		1					
1. COMPANY NAME Milwaukee Se		Chemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
4. P.O. BOX OR STREE  14765 W. BO		ıue	17					
5. CITY, STATE, ZIP CO		3051	6. TELEPHONE NUMBER ( 414 - 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
(   ) Tanker	4,500	Waste Sol	vent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 2 2. Liquid	F003	33,750
				1	j -	1. Solid 3. Mixture 2. Liquid		
			·	- <b>4</b> -		1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for trans Fransportation and th	portation according t se EPA and the Wis. D	Department of Natural Resources.	16. AUTHORIZEDS	IGNATURE	Harana A	A. Me	17. DATE SHIPPED M D Y
*	z; ;	4 14.4	4 3 4	1 3	4 1	<del>*</del>		
TRANSPORTER SECT	ION				ASTE FACILITY	SECTION		
18. COMPANY NAME	T	•	19.EPA IDENTIFICATION NO. 1LD069506160	32. FACILITY NA		•	NO.	DENTIFICATION
Mr. Frank,		<del></del>	1TD063208190	American	TREET ADDRESS		INDOT	6360265
201 West 1				1		· · ·		
201 West 1		-	22. TELEPHONE NUMBER	35. CITY, STATE,	Colfax Ro	ad	136 7515	PHONE NUMBER
South Holls		173	(312)-596-3377	1 '				
23. COMMENTS	and, In ou-	173	1 312 390-3311	Griffith,	Indiana		1 , 21	9-924-4370
201 0011111211113		35 and 1		S7. COMMINICATIO				
			·		•			•
				I hareby so Pife to	the flower samed -	stocks and indicated account	tullary bar than	el heen
in proper condition for tran designated as Hazardous Wa	sportation and Lackr ste Facility.	nowledge that delivery	v(ies) has (have) been accepted v shall be made to the facility	receive than accepte 38. AUTHORIZED	SIGNATURE	iterials and indicated quanti	ty(ies) has (hav	40. Date Accepted
24. AUTHORIZED SIGN	25.	NAME (Print)	26. Date Accepted 27/2/183	received and accept	ne above named ma	·	ly(les) has (hav	·
in proper condition for tran designated as Hazardous Wa	sportation and Lackr ste Facility.	and indicated quantity nowledge that delivery	y (ies) has (have) been accepted y shail be made to the facility	41. ALTERNATE	HAZARDOUS WAST	E FACILITY NAME	42.EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telepi (608-266-3232 (800-424-8802)	)
		-	TO 2107 7-50	Box 8094 Madison, Wisco	nsin 53708	FOR DNR USE ONLY		

HAZARDOUS WASTE MANIFEST FORM

REV. 6-81

MANIFEST NUMBER

140444

0.05349

Wisconsin Statutes 144 FORM 4400-66 See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION					······································		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		-
Milwaukee So	lvents & C	hemicals	WIDO23350192					
4. P.O. BOX OR STREET	T ADDRESS			<del>-</del> ,				
14765 W. Bob		ue						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fa	11s, WI 53	051	(414)-252-3550	<u>.                                    </u>				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Sol	lvent NOS	Flammable Liquid	บท1993	1. Solid 3. Mixture 2	F003	33,750
						1. Solid 3. Mixture 2. Liquid		:
			,	· <del>.</del>		1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	r condition for trans ransportation and th	portation according to as EPA and the Wis. D	the applicable regulations epartment of Natural Resources.	Robert 9	deitzen.	Robert Heat	zer	17. DATE SHIPPED M D Y 5 / LY 93
TRANSPORTER SECTI	ON	<del></del>	<del>· · · · · · · · · · · · · · · · · · · </del>	HAZARDOUS WA	NOTE EACH ITY	SECTION F		<del></del>
TRANSPORTER SECTI	ON ·		19 EPA IDENTIFICATION	32. FACILITY NAM		SECTION 1 1	33. EPA 10	ENTIFICATION
Mr Prank	Ina		NO. ILDO69506160	American	Chomianl	·	NO.	
Mr. Frank, 20. P.O. BOX OR STREET	T ADDRESS		111003300100	34. P.O. BOX OR S	TREET ADDRESS		LINDOI	6360265
201 West 15	5th Street			420 Sotuh	Colfax Ro	he		
21. CITY, STATE, ZIP CO	DE DELEGE	·	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE	<u>au</u>	36. TELEP	HONE NUMBER
South Holla	nd. Illino	is 60473	1 (312) 5963377	Griffith,	Iddiana		( 21	9 924-437
23. COMMENTS		SU FYIIV		37. COMMENTS	THE PARTY OF THE P	<del></del>		2_264_337
·				,				
					£	•		
I hereby certify that the abo in proper condition for tran- designated as Hazardous Was	sportation and Lackn	and indicated quantity lowledge that delivery	(ies) has (have) been accepted shall be made to the facility	received and accepte	the above vined ma	iterials and indicated quantit		0. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	I hereby certify that	the abye named ma	terials and indicated quantit	y (les) has (have	5 129185
I hereby certify that the abo in proper condition for tran- designated as Hazardous Wa	ive named materials a sportation and I ackn	and indicated quantity	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA ID	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	T	5. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Wasto Management		sistance Teleph 508-266-3232) 300-424-8802)	
		TO210F	r-50 6km 5.24.83	Box 8094 Madison, Wiscon	_	FOR DNR USE ONLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

140454

MANIFEST NUMBER

	, panis	prosentation				· · · · · · · · · · · · · · · · · · ·		
GENERATOR (SHIPPE	R) SECTION						·—···	
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Solv	rents & Chemi	icals Corp	WID023350192					
4. P.O. BOX OR STREE	T ADDRESS			1				
14765 W. Bobol								•
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUMBER	1				
Menomonee Fall			(414) 252-3550					•
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
( ) Tanker	5,000	Waste Solve	ent NOS	Flammable Liquid	F003	35,000		
						1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
			d, described, packaged, marked,	15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
and labeled and are in proper of the U.S. Department of I I also certify that the inform	Transportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Ribert	Heitze	Robert Heitzer		1/16/2
TRANSPORTER SECT	ION			HAZARDOUS W		SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM			33. EPA I	DENTIFICATION
Mr. Frank, Inc			11006950 <b>5</b> 160	American C	· · · · · · · · · · · · · · · · · · ·		INDOL	6360265
20. P.O. BOX OR STREE				34. P.O. BOX OR S				
201 West 155th					Colfax Road			
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMBER	35. CITY, STATE,				PHONE NUMBER
South Holland,	, IL 60473		(312)596-3377	Griffith,	Indiana		( 219	9) 924-4370
23. COMMENTS				37. COMMENTS				·
I hereby certify that the abo	ove named materials	and indicated quantity	y(ies) has (have) been accepted y shall be made to the facility	I hereby certify that received and accepte	the above named ma	iterials and Indicated quantit	y(ies) has (hav	ve) been
designated as Hazardous Wa	iste Facility.	•		38 AUTHORIZED	SIGNATURE	39. NAME (Print)		40. Date Accepted
24 AUTHORIZED SIGN	ATURE 25	Cherine (Print)	26. Date Accepted MINS MIPGIX3	Thereby certify that	the above named ma	Ightals and indicated quantit	y(ies) has (hav	e) been
I hereby certify that the about the proper condition for transdesignated as Hazardous Wa	isportation and I ack	and indicated quantity	y (les) has (have) been accepted y shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGN	ATURE 30	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		sistance Telep 608-266-3232 800-424-8802	)
		TO 2107	_	Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY		
HAZADDOHG W	ACTE PACIFI	mv 6	RN 2.16.83			Ĺ <u> </u>		

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GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · · ·			<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So.	lvents &-C	Memicals	WID023350192					· -
4. P.O. BOX OR STREET						<u>.</u>		
14765 W. Bob	olink Aven	ue	ŀ			-		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fa	11s. WT 53	051	(414)252-3550					
		i -	12. 232 3330	<del></del>	11. US DOT	T	1	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   Tanker	5,000	Waste Solv	ent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	40,000
						1. Solid 3. Mixture 2. Liquid		
,			,			1. Solid 3. Mixture 2. Liquid		
				15. AUTHORIZED SI	GNATURE	16. NAME (Print)	*	17. DATE SHIPPED M D Y
and labeled and are in prope of the U.S. Department of T Laiso certify that the inform	ransportation and th	ne EPA and the Wis. De	epartment of Natural Resources.	Robert 7	Citye	Robert Heitz	er	115184
		4		* *				
TRANSPORTER SECTI	ON			HAZARDOUS WA		SECTION		
18. COMPANY NAME	J. 18 1. 18	8	19. EPA IDENTIFICATION	32. FACILITY NAM	E	·;	L NO.	ENTIFICATION
Mr. Frank, Inc			ILD069506160	American C	Chemical		INDO	16360265
20. P.O. BOX OR STREET		₹;		34. P.O. BOX OR 57	REET ADDRESS			
201 West 155th				420 South		ad		:
21. CITY, STATE, ZIP CO		# · · · · · · · · · · · · · · · · · · ·	22. TELEPHONE NUMBER	35. CITY, STATE, Z	IP CODE	<del></del>	36. TELEP	HONE NUMBER
South Holland,	IL 60473		(312)-596-3377	Griffith,	Indiana		21	9 <sup>.</sup> 924–437¢
23. COMMENTS				37. COMMENTS				
						tallsk and ledkelad av žil	W. Carlos	N. Page
in proper condition for trans designated as Hazardous Was	portation and I ackr ite Facility.	nowledge that delivery		received and accented 38. AUTHORILES	GNATURE	terials and Indicated quantil	11.57	0. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	$\mu$	MARIA TO	1-1)	<u> </u>	1/29/03
Kori Budgarate	$\mathcal{L}(\mathcal{C})$	Brilyewal	TOR 15 184	I hereby certify that t received and accepted	he above pamed ma	terfals and indicated quantit	ty(les) has (have	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials a portation and I ackr te Facillty.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDŌUS WAST	E FACILITY NAME	42. EPA IC	PENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	4	5. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management	Outside Wisconsin	ssistance Teleph (608-266-3232) (800-424-8802)	
		, 1	TO21127.50 6KM 1.5.84	• Madison, Wiscon	sin 53708°•-	FOR DNR USE ONLY		
HAZARDOUS WA	STE FACILIT	Ϋ́	6KM 1.5.84			L		

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard,

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME Milwaukee So	1	1 1 1	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
		nemicals	WID023350192	]				
4. P.O. BOX OR STREE 14765 W. Bob		านอ						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	1		•		
Menomonee Fa	11s, W1 5	3051	(414)-252-3550			·	<del></del>	<del>,</del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4,500	Waste Solv	rent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
·						1. Solid 3. Mixture 2. Liquid	]	
•						1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab			, described, packaged, marked,	15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
	Transportation and t	he EPA and the Wis. D	epartment of Natural Resources.	Robert 7	4 cityen	Robert Heit	zer	1728184
TRANSPORTED OF OTHER		- <del></del>	<del></del>			0507:01		<del></del>
TRANSPORTER SECTI	ION		19. EPA IDENTIFICATION	HAZARDOUS WA		SECTION	133. FPA II	DENTIFICATION
Mr. Frank, I	nc		ILD069506160				NO.	6360265
20. P.O. BOX OR STREE	T ADDRESS	·····	11D069306160	American (	TREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	TINDOI	.0300203
201 West 155			·		Colfax Ro	ad		
21. CITY, STATE, ZIP CO		<del></del>	22. TELEPHONE NUMBER	35. CITY, STATE,	IP CODE		36. TELE	HONE NUMBER
South Holland	d, IL 6047	3	(312)596-3377	Griffith,	Indiana		(219	924-4370
23. COMMENTS				37. COMMENTS	<del></del>		<del></del>	
				}				}
		•	j					
			Ì					į
<del> </del>	<del></del>			Lhereny certify that	the above named ma	iterials and Indicated quant	iv(ies) has (hav	e) been
in proper condition for trans designated as Hazardous Was	sportation and Lack	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	received and accepted	d	39. NAME (Print)		40. Date Accepted
24. AUTHORIZED SIGNA	•	NAME (Print)	. 26. Date Accepted	1001	′ /	p Oct of	,	1 18 6 Jul
Mr. Vander		THAT! I SHIDE	(n) 1 / 126 /24	Phoreby corrlly that	the above named ma	terrals and Indicated quanti	ty(les) has (hav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	sportation and Lack	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		Assistance Telep (608-266-3232 (800-424-8802	)
		Tn 210	K T-50	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY	<del></del>	
HAZARDOUS WA	ASTE FACILI	TY	E T-50 6114 1.2684			L		

See reverse side, Copy 6, for instructions.

### HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

Madison, Wisconsin 53708

MANIFEST NUMBER

116167

Please type or print clear	ly using ball poin	t pen – press hard.	70.	HIM 44	400-66	HEV. 6-81		·	
GENERATOR (SHIPPE	R) SECTION	· · · · · · · · · · · · · · · · · · ·	<del>· · · · · · · · · · · · · · · · · · · </del>			<del></del>	<del></del>		
1. COMPANY NAME		<del></del>	2. EPA IDENTIFICATION N	10.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee S	olvents &	Chemicals	WID023350192 ·	_					
14765 W. Bo	holink Ave	anne		- }					
5. CITY, STATE, ZIP CO	DOLLIN AV	511.00	6. TELEPHONE NUMBER			•		•	
ì		consin 53051	(414)- 252-355	0					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		WASTE NAME	<u>~1</u> _	10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA	14. SHIPPING
( ) Tanker	4,500	Waste Solv	rent NOS		Flammable Liquid		1. Solid 3. Mixture 2	F003	36,000
( ` .							1. Solid 3. Mixture 2. Liquid		
*							1. Solid 3. Mixture 2. Liquid		
			, described, packaged, marked,	15	S. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
	Transportation and	the EPA and the Wis, D	o the applicable regulations epartment of Natural Resources d complete.	s	Robert H.	eitzer	Robert Heit	zer	211 134
, , , , , , , , , , , , , , , , , , ,									
TRANSPORTER SECT	ION	· · · · · · · · · · · · · · · · · · ·			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION		32. FACILITY NAM			NO.	DENTIFICATION
Mr. Frank, In 20. P.O. BOX OR STREET	c.		ILD069506160	1	American 34. P.O. BOX OR S	Chemical		INDO	L6360265
201 West 155t		· <del></del>	22. TELEPHONE NUMBER	4 1-	420 Sout	h Colfax R	oad	136 7010	PHONE NUMBER
,		_		1 (	•			1	
South Holland 23. COMMENTS	, IL 5047	3	(312)596-3377	-1  -	Griffith 37. COMMENTS	, Indiana	<del></del>	1 ,513	91-924-4370
					I hereby certify that	the above named ma	iterials and indicated quanti	itylles) has (hav	ve) been
in proper condition for tran-	sportation and I acl	rand indicated quantity knowledge that delivery	(les) has (have) been accepted shall be made to the facility	1 1	received and accepted 38. AUTHORIZED	d	39. NAME (Print)		40. Date Accepted
designated as Hazardous Wa 24. AUTHORIZED SIGNA		, NAME (Print)	26. Date Accepted						
12.74/63		1 11611 18 11		1 -	I hereby certify that	the above named ma	RRUShnoterials and Indicated quanti	ty(les) has (hav	/e) been
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	ove named materials	and indicated quantity	(ies) has (have) been accepted shall be made to the facility	-	41. ALTERNATE H	d. IAZARDOUS WAST	E FACILITY NAME	42. EPA II	DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	1	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted
29. AUTHORIZED SIGN	ATURE 30	, NAME (Print)	31. Date Accepted	֓֟֟֟֓֟֟֓֟֓֓֓֓֓֓֓֓֟֟֓֓֟֟֓֓֟֟֓֓֟֟֓֓֓֟֓֓֟֓		Natural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)

TO 210 RT. SO BRM 21.84

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FOR DNR USE ONLY	
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See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

עומיאסוזארווים אואמיוים האפוד דיוע

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPAI	DENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTION	ONS		,
Milwaukee So	lvents &	Chemicals	WIDO	23350192					
4. P.O. BOX OR STREE	T ADDRESS							•	
14765 W. Bob	olink Ave	enue		•					
5. CITY, STATE, ZIP CO	DDE		6. TELE	PHONE NUMBER			,		_
Menomonee Fa	ills, WI 5	3051	(4)	4 252-3550	<u> </u>				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE	IAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING EWEIGHT (Pounds
(   ) Tanker	5000	Waste Sol	vent N	ios	Flammable Liquid	NA1993	1. Soild 3. Mixture 2 2. Liquid	F003	40.000
					1		1. Solid 3. Mixture 2. Liquid		
							1. Solid 3. Mixture 2. Liquid		
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18. COMPANY NAME				DENTIFICATION	32. FACILITY NAM	1E .		33. EPA 1	DENTIFICATION
Mr. Frank, I			Lipo	69506160	American				16360265
20. P.O. BOX OR STREE	· · · ·				34. P.O. BOX OR 5	TREET ADDRESS			
201 West 155					420 South	Colfax Ro	bac		
21. CITY, STATE, ZIP CO				PHONE NUMBER	35. CITY, STATE, 2			36. TELE	PHONE NUMBER
South Hollan	d, IL 604	73	31	2   596-3377	Griffith,	Indiana		(219	<sup>3)-</sup> 924-4370
23. COMMENTS					37. COMMENTS				•
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					38. AUTHORIZED	SIGNATURE	39. NAME (Print)	İ	40. Data Accepted
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		Sand 11 11 16			received and accepted	1			
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27. 2nd. TRANSPORTER			28. EPA 1 NO.	DENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30	. NAME (Print)		31. Date Accepted M / D / Y	46. MAIL TO:	Internal Parameter	47. Emergency 24 Hour A	ssistance Telep	hone Number

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST NUMBER

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GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS	<u> </u>	
Milwaukee Sol	vents & Cl	nemicals	WID023350192	,				
4. P.O. BOX OR STREE			<del></del>	**	•	·		
14765 W. Bobo		ıe .						
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Menomonee Fal	ls, WI 530	)51	(414)252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
( ) Tanker	4,500	Waste Solv	ent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture 2 2. Liquid	F003	36,000
			r.			1. Solid 3. Mixture 2. Liquid		
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for trai Transportation and	sportation according to he EPA and the Wis. D	epartment of Natural Resources.	Robert 7		Robert Heit:	zer	17. DATE SHIPPED M D Y 2 /6 /64
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TRANSPORTER SECTI	ION			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM	ME.		33. EPA I	DENTIFICATION
Mr. Frank, I	nc.		ILD069506160	American				16360265
1				34. P.O. BOX OR S				
201 West 155					Colfax Ro	ad		
	•		22. TELEPHONE NUMBER	35. CITY, STATE,				PHONE NUMBER
South Hollan	a, 1111no	8 60473	312 596-3377	Griffith,	Indiana		1219	924-4370
	-							
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designated as Hazardous Wa		NAME (Print)	26. Date Accepted	38. AUTHORIZED	SIGNATURE	39. NAME (Print)  A A A A A A A A A A A A A A A A A A A		40. Date Accepted
/	<u> </u>	d adjunt		I hereby certify that received and accepte	the above named ma d.	terials and Indicated quantil	y(les) has (hav	e) been
I hereby certify that the abo in proper condition for tran designated as Hazardous Wa	sportation and I acl	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE	AZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME	,	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29 AUTHORIZED SIGNA	ATURE 30	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)
		7 00	17 57	Box 8094 Madison, Wiscor	sin 53708	FOR DNR USE ONLY		

FOR DNR USE ONLY

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GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals WID023350192				3. COMMENTS/SPE	CIAL INSTRUCTIO	NS )		······································
4. P.O. BOX OR STREET 14765 W. Box		ue						
5. CITY, STATE, ZIP CO Menomonee Fa		051	6. TELEPHONE NUMBER (414)252-3550	7	v			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
Tanker	4,500	Waste Se	olvent NOS	Flammable Liquid	N#1993	1. Solid 3. Mixture Z 2. Liquid	F003	E. C. parco
						1. Solid 3. Mixture 2. Liquid		,
						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	r condition for transp ransportation and the	ortation according to EPA and the Wis. De	epartment of Natural Resources.	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y

FORM 4400-66

TRANSPORTER SECTION		HAZARDOUS WASTE FACILITY	SECTION	
18. COMPANY NAME	19. EPA IDENTIFICATION	32. FACILITY NAME		33. EPA IDENTIFICATION
Mr. Frank, Inc.	ILD069506160	American Chemical	. 1	INDO16360265
20. P.O. BOX OR STREET ADDRESS		34. P.O. BOX OR STREET ADDRESS	5	
201 West 155th Street		420 South Colfax Ro	oad	
21. CITY, STATE, ZIP CODE	22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
South Holland, IL 60473	(312 )596-3377	Griffith, Indiana		(219)924-4370
23. COMMENTS		37. COMMENTS		ı
I hereby certify that the above named materials and indicated quanti in proper condition for transportation and I acknowledge that delive designated as Hazardous Waste, Facility.	ry shall be made to the facility	I hereby certify that the above named of received and accepted.  38. AUTHORIZED SIGNATURE	materials and indicated quan	40. Date Accepted
21. AUTHORIZED SIGNATURE 25. NAME (Print)	SUIN 26. Date Accepted	I hereby certify that the above named neceived and accepted.	naterials and indicated quant	(ity(les) has (have) been
I hereby certify that the above named materials and indicated quanti in proper condition for transportation and I acknowledge that delive designated as Hazardous Waste Facility.		41. ALTERNATE HAZARDOUS WAS	STE FACILITY NAME	42. EPA IDENTIFICATION
27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.	43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNATURE 30. NAME (Print)	31. Date Accepted M / D / Y	46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Managemen	In Wisconsin	Assistance Telephone Number (608-266-3232) (800-424-8802)

Box 8094

Madison, Wisconsin 53708

To 2057 T.SO GRAY 2.15.84

HAZARDOUS WASTE FACILITY

Please type or print clearly using ball point pen - press hard.

See reverse side. Copy 6, for instructions.

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GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals WIDO23350192 4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Menomonee Falls, Wisconsin 53051 (414)252-3550 11. US DOT IDENTIFICATION NUMBER 7. NUMBER & TYPE OF 10. US DOT 14. SHIPPING 12. PHYSICAL STATE 13. US EPA 8. GALLONS 9. WASTE NAME CONTAINER HAZARD CLASS (Enter number in box) WASTE CODE WEIGHT (Pounds Flammable 1. Solid 3. Mixture 2 Tanker Waste Solvent NOS 2. Liquid Liquid NA1993 F003 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) 17. DATE SHIPPED This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations Zil Lockbonii C of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources, I also certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION A ... HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION Mr. Frank, Inc. ILD069506160 American Chemical INDO16360265 20. P.O. BOX OR STREET ADDRESS 34. P.O. BOX OR STREET ADDRESS 201 West 155th Street 420 South Colfax Road 21. CITY, STATE, ZIP CODE 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER 22. TELEPHONE NUMBER South Holland, Illinois 60473 <sup>(</sup>312 <sup>)</sup>596-3377 <sup>(</sup>219<sup>) </sup>924–4370 Griffith, Indiana 23. COMMENTS 37. COMMENTS I hereby certify that the above named materials and indicated quantity(les) has (have) been I hereby certify that the above named materials and indicated quantity (les) has (have) been accepted received and accepted.

38. AUTHORIZED SIGNATURA in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 40. Date Accepted 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION 27. 2nd, TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 47, Emergency 24 Hour Assistance Telephone Number 46, MAIL TO: .: Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802) Box 8094 FOR DNR USE ONLY TO 210 F 1-50 GRY 2.20.84 Madison, Wisconsin 53708

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GENERATOR (SHIPPE									
1. COMPANY NAME	11, 02 31(0)	<del></del>	2. EPA (DENTIFICATIO	UN!	IE (ITS/SPEC	HAL INSTRUCTIO	NS 20		
Milwaukee S	olvents &	Chemicals	1 "	1			<i>;</i>		
4. POLBOX OR STREET	T ADDRESS	On Care		-	. ;5				
14765 W. Bo	halink Ave	211110		1					
S. CITY STATE 719 CO			6. TELEPHONE NUMBE	ER					
Serononee F	alls. WI	33051	(414) 252-35	550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME		IS, US DOT HATTED CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)	12 US EPA WASTE CODE	A. SHIPPING
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Tanker	1500	Waste Sc	olvent NOS		Lilipid	NA1993	2. Liquid	FOO3	-12 100
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and labeled and are in prope	er condition for trans Transportation and t	sportation according the EPA and the W	affied, described, packaged, mar ng to the applicable regulations is. Department of Natural Reso te and complete	s	IS. AUTHORIZED SI	GNATURE	16. NAME (Print)	<u>ح 4.00</u>	17. DATE SHIPPED M D Y
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TRANSPORTER SECTI	ON	<del></del>	<u> </u>		HAZANDOUS WA	STE FACILITY	SECTION 4		
18. COMPANY NAME			19. EPA IDENTIFICATION	'5	32. FACILITY NAM	Ξ		33. EFA ! NC.	DENTIFICATIO
Mr. Frank, In		_1.4	TLD069506163	)	American (				6360265
20. P.O. BOX OR STREE					34. P.O. SOX OR \$3	REET ADDRESS	24.		
201 West 155t						Colfax Ro	<u> გ                                   </u>		
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South Holland	, Illinois	604363	312-596-3	3377	Griffith,	Indiana	· · · · · · · · · · · · · · · · · · ·	213	<sup>1</sup> 9 137
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	ive named materials	and indicated quar	ntity(ies) has (have) been acceptivery shall be made to the facility		4	¥ะ#ั่งกรอบร พ.≖ร <del>−</del>	E TOILITY NAME	42. EPA 10 NO.	DENTIFICATIO
27. 2nd, TRANSPORTER		<del></del>	28. ERO IDENTIFICATIO	ON	For Francisco	ATURE	AA. NAME (Print)		45. Date Accepte
29. AUTHORIZED SIGNA		NF Më "Print;	31. Date Acco		t. 1. : N	nusta, Resources		ssistance Telep (608-266-3232 (800-424-8802	)
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See reverse side, Copy 6, for instructions.

Wisconsin Statutes 144

REV. 6-81

A 11617

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Please type or print clearly using hall point pen - press hard. GENERAT. - ISHIPPER) SECTION 1. COMI ... 638E 2. EPA IDERTHEICAND NOW 5 JUMMENTS/SPECIAL POFRUCTIONS Milw. .. . a Solvente & Characania. MID020350192 19765 W. Bobolink Averga 5. CHY, STANS, ZIP CODE G. TELEPHONE NUMBER Menomonia Falls, WI 33051 414 - 252-3850 11. US DOT IDENTIFICATIO NUMBER 7 NUMBER - ( PEIDE M. US DOT 8. GALLORS 9. WASTE HAME (Enter number in Box) WASTE CODE WEIGHT (Pounds) CONTAL . F. HALARD CLASS Flammable 1. Solid 3. Mixture 2 1500 NA1993 F003 Tanker Waste Solvent NOS Liquid 2. Liquid 1. Solia 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid 16. NAME (MIN) 15. AUTHORIZED SIGNATURE 17. DATE SHIPPED ima is to certify that the above named materials are properly classified, described, packaged, market. and tabeled and are in proper condition for transportation, according to the applicable regulations M D of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Accources. Robert Restrer also certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION HAZAHDOUS WASTE FACILITY SECTION 32. FACILITY NAME 18. COMPANY NAME 19.EPA IDENTIFICATION 33. EPA IDENTIFICATION Mr. Frank, Ing., 20. P.O. BOX OR STREET ADDRESS American Chemical
34. P.O. BOX OR STREET ADDRESS IND016360265 420 South Colfax Road 201 West 155th Street 22. TELEPHONE NUMBER 25. TELEPHONE NUMBER 219 924-4370 Griffith, Indiana South Holland, Illinois 60473 LOMMEN'S I nevery certify that the above named materials and indicated quantity (iss) has (have) been I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and tracknowledge that delivery shall be made to the facility. received and received. 39. NAME (Print 40. Date Accepted designated as Hazardous Waste Facility. 24. AUTHORIZED, SIGNATURE 25. Date Accept is he day certify that the police named materials that incloses out of the has thave the 41, ALTERNATE HARAT DATE MASTE LAUN. hereby certify that the above named materials and individed quantity(les) has (have) been accepted in proper condition for fransportation and it acknows to the made to the facility designated as Hazardous Waste Facility. 28. EPA IDENTIFICATION 45. Date Accepted 27. 28d. TRANSPORTER CO. 127, NY NO. 43, AUTHORIZED SIGNATURE 44. NAME (Print: MIDIY 29" ACCIORIZED SIGNITUAT 1, Clair Acceptad 47. Emeryancy 24 Hour Resistance Telephone Clumber 46. E'AIL TO: 7809-255-2237 ta Wisashiin of Solid Victor Manufactures Octside Wisconsin (80.000 98.0 W 4394 FOR DNR USE ONLY Mediwin, Wisconsin 52709

# STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

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See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

A 116174

GENERATOR (SHIFPE	R) SECTION	<b>4</b>		and control of the second					
1. COMPANY NAME  MILWAUKEE	Solvents s	s Marcello Color V		Princavioles. Santav	J. CO MMEN IS/SPE	CIAL INSTRUCTIO	NS *		
4. P.O. BOX OR STREE		E Control of the Section	S I CARA PARAMENT	t in the first factor of the state of the st			۵.		
14765 W. B	obelink Av	rente	•		1		:		
5. CITY, STATE, ZIP CO		· · · · · · · · · · · · · · · · · · ·	6. TE	า การุธแ <b>สมสา</b> กา					
Menomonee	Falls, WI	53051	( 1	- 252-3550		<u> </u>	4		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	<b>X</b> :	9. WASTE NAS	12	10. US DOT HAZARD CLASS	11, US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
// ) Tanker	4520	Waste So	lvent		Flammable Liquid	NA1993	1. Solid 3. Mixture 2	F003	. 6. Sept
		!					1. Solid - 3. Mixture 2. Liquid		
	1						2. Solla 3. Mixture		
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	DN 1	,			HAZARDOUS WA		SECTION		
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21. CITY, STATE. ZIP CO	DE		22. TELEPHO	ONE NUMBER	35. CITY, SYATE, 2	IP CODE	,	1	HONE NUMBER
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29 AUTHORIZED SIGN.	ATURE 55.	MANGE BULLY	A CONTRACTOR OF THE PARTY OF TH	Little All San		latural Resources Waste Management		stistance Telepi /603-255-3232/ /603-324-3234/	
			t a cate cay		Box 8094 Madison, Wiscon	_	FOR DNR USE CALLY		

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME Milwaukee Sol		hemicals	2. EPA IDENTIFICATION NO WIDO23350192	D. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
4. P.O. BOX OR STREE 14765 W. BODO		ue						
5. CITY, STATE, ZIP CO Menomonee Fal		051	6. TELEPHONE NUMBER ( 414) -252-3550				٠	•
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
()) Tanker	1200	Waste Solve	ont NOS .;	Liquid	NA1993	1. Solid 3. Mixture 2	F003	,
						1. Solid 3. Mixture 2. Liquid		
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TRANSPORTER SECTI	ON I		- 70	HAZARDOUS WA		SECTION		
Mr. Frank, In			4500	32. FACILITY NAN	Chemical			6360265
20. P.O. BOX OR STREET 201 West 155t			1	1	Colfax Ro		٤.	
21. CITY, STATE, ZIP CO South Holland		60473		5. CITY, STATE, 2 Griffith,				HONE NUMBER 370
23. COMMENTS			4	37. COMMENTS				
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27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management	47. Emergency 24 Hour A in Wisconsin Outside Wisconsin	Assistance Telepi (608-266-3232) (800-424-8802)	)
					-	FOR DNR USE ONLY		

## STATE OF WISCONSIN

Mail Copies To:

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Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84 State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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16. GENERATOR'S CERTIFICATION: I hereby declar	e that the contents of thi	s consignment	are fully and acc	urately
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and according to the requirements of the Wisconsin 1	Department of Natural R	esources.		Date
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State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Re Chapter 144, Wis. Stats. Rev: 7-84

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Form 4400-66 Re Chapter 154, Wis. Stats. Rev. 7-84 State of Wisconsin
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Bureau of Solid Waste Mgt.
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Madison, Wisconsin 53708

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FOR	DNR	USE C	NLY

Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

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COPY 4

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STATE OF WISCONSIN Mail Copies To: FOR DNR USE ONLY Department of Natural Resources Form 4400-66 Rev. 7-84 Bureau of Solid Waste Mgt. Chapter 144, Wis. Stats. Box 8094 Madison, Wisconsin 53708 Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Manifest Document No. Information in the shaded areas 2. Page 1 1. Generator's US EPA ID No. UNIFORM HAZARDOUS is not required by Federal law. WASTE MANIFEST 20000 ID02335019 3. Generator's Name and Mailing Address A. State Manifest Document Number Milwaukee Solvents & Chemicals <u> 15456</u> 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051 B. State Generator's ID 4. Generator's Phone ( <u> 252–3550</u> 5. Transporter 1 Company Name 6. US EPA ID Number C. State Transporter's ID 7. Transporter 2 Company Name 7 P. D. O. G. 9 S. D. G. 1. 8. US EPA ID Number D. Transporter's Phone 312-596-337 E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc. 420 South Colfax H. Facility's Phone Griffith, Indiana 46319 219-92 INDO16360265 12. Containers Total 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste No. Type Quantity Wt/Vc Waste Flammable Liquid NOS Flammable Liquid, UN1993 G F003 Ъ, A d. K. Handling Codes for Wastes Listed Above J. Additional Descriptions for Materials Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately

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Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232)

Outside Wisconsin (800-424-8802)

Item 19.

Printed/Typed Name

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20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in

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2 — Generator 5 — Generator 3 — BSWM 6 — Transporter

Date

Month Day

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Signature

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Madison, Wisconsin 53708

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State of Wisconsin Bureau of Solid Waste Mgt.

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Form 4400-66 Rev. 7-84 Department of Natural Resources Box 8094

Chapter 144, Wis. Stats. Madison, Wisconsin 53708 Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Manifest Document No. 1. Generator's US EPA ID No. 2. Page 1 Information in the shaded areas UNIFORM HAZARDOUS is not required by Federal law. <u>Waste manifest</u> W F D O 2 3 3 5 6 1 9 0000 3. Generator's Name and Mailing Address A. State Manifest Document Number Milwaukee Solvents & Chemicals B. State Generator's ID 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051 4. Generator's Phone ( 414 ) 252-3550 5. Transporter 1 Company Name 6. US EPA ID Number C. State Transporter's ID Mr. Frank. Inc. 7. Transporter 2 Company Name 7 L D O G 9 5 O 6 1 6 D. Transporter's Phone 312-596-3377 8. US EPA ID Number E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc. 9180890002 H. Facility's Phone 420 South Colfax 219-924-4370 Griffith, Indiana 46319 INDO16360265 12. Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste No. Туре Quantity D001 Waste Flammable Liquid NOS X Flammable Liquid, UN1993 Ъ. c. d. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations Date and according to the requirements of the Wisconsin Department of Natural Resources. Printed/Typed Name Month Day Year Signature etrich 17. Transporter 1 Acknowledgement of Receipt of Materials Date Month Day Printed/Typed Nam Signature 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Year Signature Month Day معط 20.518 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Printed/Typed Name Signature Month Day

Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)

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Distribution: 1 - BSWM 2 - Generator 5 - Generator 3 - BSWM 6 - Transporter

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2 / CD, BSWM Copies 1 & 3 mail to above.

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T Printed/Type	NA IN		Signature	<u> </u>	- 11	<u> </u>		Date
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Emergency 24 Ho	ur Assistance Teleph	one Number		J-V	Dietri	bution: 1 - B	SWM	4 — Facility
In Wisconsin	(608-266-3232)		211 K T-50		V	2 — C	enerat	or 5 - Generator
Outside Wisconsir	(800-424-8802)				DCU21		SWM	
	,		COPY 4		BSWI	A Copies 1 &	᠈ᡛᡛ	<b>64.69</b>

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State of Wisconsin Department of Natural Resources Bureau of Solid Waste Mgt.

FOR DNR USE ONLY

Form 4400-66 Rev. 7-84 Chapter 144, Wis. Stats.

Box 8094 Madison, Wisconsin 53708

Mariana Catalana da la			W		16!		nt Number <b>7</b>
Milwaukea Solvents & Chemic		_					l
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4. Generator's Phone ( 414 ) 252-355			<u> </u>				<del></del>
5. Transporter 1 Company Name	6. US EPA ID Numbe			ate Trans			
Mr. Frank, Inc.	I L D 0 6 9 5		D. Tr	ansporte	r's Pho	ne 3	12-396-337
7. Transporter 2 Company Name	8. US EPA ID Numbe	r	E. St	ate Trans	sporter	's ID	<u>a da Maria da Sa</u>
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9. Designated Facility Name and Site Address	10. US EPA ID Numbe	ŗ	G. St	ate Facil	ity's II	)	
American Chemical Service I	Inc.						
420 South Colfax			H. Fa	cility's I			
Griffith, Indiana 46319	I N D O 1 6 3	6, 0, 2, 6, 5	Criv	219-9	124-4	370	
		12. Conta	iners	_13		14.	
11. US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Number)	No.	Туре	Tot Quan		Unit Wt/Vol	I. Waste No.
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BSWM Copies 1 & 3 mail to above.

### STATE OF WISCONSIN

Mail Copies To:

State of Wisconsin Bureau of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

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4. Generator's Phone (414) 252-3550 5. Transporter 1 Company Name	; 6. US EPA ID Number		C 81	ite Transporte	r'e ID	
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7. Transporter 2 Company Name	8. US EPA ID Number			ate Transporte		
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State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

Generator's Name and Mailing Address  Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 530.  Generator's Phone ( 414 ) 252-3550  Transporter 1 Company Name  Mr. Frank, Inc.  Transporter 2 Company Name  Designated Facility Name and Site Address  American Chemical Service Inc.  420 South Colfax  Griffith, Indiana 46319  I. N. D. O. 1. 6. 3. 6.	6.1.6.0	B. Sta  C. Sta  D. Tra  E. Sta  F. Tra	ate Generator's ate Transporter	555 ID rs ID one 31	0079
14765 W. Bobolink Avenue - Menomonee Falls, WI 530.  Generator's Phone ( 414 ) 252-3550  Transporter 1 Company Name 6. US EPA ID Number 6. US EPA ID Number 1. L. D. O. 6. 9. 5. 0.  Transporter 2 Company Name 8. US EPA ID Number 8. US EPA ID Number 10. US EPA ID	6.1.6.0	B. Sta C. Sta D. Tra E. Sta F. Tra	ate Generator's ate Transporter ansporter's Pho	ID s ID one 31	0019
Generator's Phone (414) 252-3550  Transporter 1 Company Name  Mr. Frank, Inc.  Transporter 2 Company Name  Designated Facility Name and Site Address  American Chemical Service Inc.  420 South Colfax	6.1.6.0	D. Tre	ansporter's Pho	one 31	
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t. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	No.	Туре	Total Quantity	Unit Wt/Vol	I. Waste No.
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5. Special Handling Instructions and Additional Information					
6. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this contents described above by proper shipping name and are classified, packed, marked, and proper condition for transport by highway according to applicable international and according to the requirements of the Wisconsin Department of Natural Resorting Typed Name  Signature	d labeled, an and national ources.	d are i	n all respects ir	n` tions	Date Month Day Y
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<ol> <li>Facility Owner or Operator: Certification of receipt of hazardous materials covered Item 19.</li> </ol>	ea by this n				D-4-
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Chapter 144, Wis. Stats.

Form 4400-66

THE MENT COLLEGE CONTRACT OF THE PARTY

Rev. 7-84

(608-266-3232)

Outside Wisconsin (800-424-8802)

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.

Box 8094 Madison, Wisconsin 53708 FOR DNR USE ONLY

(Form designed for use on elite (12-pitch) typewriter.) Please print or type. Manifest. 1. Generator's US EPA ID No. Information in the shaded areas 2. Page 1 UNIFORM HAZARDOUS is not required by Federal law. и ты о. 2, 3, 3, 5, 0, 1, 9, 2 Q Q Q X, 8, 0 of 1 WASTE MANIFEST A. State-Manifest Document Number 3. Generator's Name and Mailing Address 16560 WI Milwaukee Solvents & Chemicals B. State Generator's ID 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051 4. Generator's Phone ( 414 ) 252-3550 6. US EPA ID Number 0079 5. Transporter 1 Company Name C. State Transporter's ID I L D O 6 9 5 0 6 1 6 0 D. Transporter's Phone 312-596-3377 Mr. Frank, Inc. 8. US EPA ID Number 7. Transporter 2 Company Name E. State Transporter's ID F., Transporter's Phone 10. US EPA ID Number 9. Designated Facility Name and Site Address G. State Facility's ID American Chemical Service Inc. H. Facility's Phone 420 South Colfax INDO 1.6.3.6.0.2.6.5 219-924-4370 Griffish, IN. 46319 13. Total 12. Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Туре Quantity Wt/Vc Waste No Waste Flammable Liquid NOS 04500 Flammable Liquid, UN1993 D001 b. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources. Date Printed/Typed Name Signature Month Day Year 0310.578.5 ARRY 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 0.518.5 03 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Printed/Typed Name Emergency 24 Hour Assistance Telephone Number Distribution: 1 - BSWM 4 - Facility

210× 1-50

2 - Generator 5 - Generator 3 - BSWM 6 - Transporter

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

OR	DN	R	USE	ON	ŲΥ

Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

In Wisconsin

Outside Wisconsin (800-424-8802)

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State of Wisconsin

Department of Natural Resources
Bureau of Solid Waste Mgt.

Box 8094

Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

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OR	18. Transporter 2 Acknowledgement of Receipt of Materials						Date
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C	20. Facility Owner or Operator: Certification of receipt of haza	rdous material covered	by this n	arifest	except as not	ed in	
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In	Wisconsin (608-266-3232)	212 F T-50	$ \sim$ $1$	70 B OC			or 5 — Generator
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State of Wisconsin \*
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Rev. 7-84 Chapter 144, Wis. Stats.

Outside Wisconsin (800-424-8802)

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## STATE OF WISCONSIN

Mail Copies To:

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094

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Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

Madison, Wisconsin 53708

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Department of Natural Resources
Bureau of Solid Waste Mgt.

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Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

Box 8094 Madison, Wisconsin 53708

UNIFORM HAZARDOUS WASTE MANIFEST W. T. D. (	tor's US EPA ID No. Dec 2: 3:3:5:0:1:9:2 0:	Manifest 2. Page Cument No. of	is not re	quired by Federal law.
3. Generator's Name and Mailing Address Milwankee Solvents & Chemicals		W:		ocument Number 301
14765 W. Bobolink Avenue - Men	4	51 B. Sta	te Generator's	ID
4. Generator's Phone ( 414 ) 252-355( 5. Transporter 1 Company Name	6. US EPA ID Number	C. Sta	te Transporter	's ID 0079
Mr. Frank, Inc 7. Transporter 2 Company Name	I.L.D.O.6.9.5.0.  8. US EPA ID Number	9		one 312-596-3377
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Griffith, Indiana 46319	DN081636	76.5. <sub>21</sub>	9-924-437	0
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Rev. 7-84

(608-266-3232)

Outside Wisconsin (800-424-8802)

In Wisconsin

State of Wisconsin Department of Natural Resources Bureau of Solid Waste Mgt.

Box 8094

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Charter 144, Wis. Stats. Madison, Wisconsin 3708 Please print or type. (Form designed for use on elite (12-pitch) typewriter.) 1. Generator's US EPA ID No. Information in the shaded areas 2. Page 1 📂 UNIFORM HAZARDOUS is not required by Federal law. |W-I-D-O-2-3-3-5-0-1-9-2|0-8-1-0-2 WASTE MANIFEST A. State Manifest Document Number 3. Generator's Name and Mailing Address 28302 Milwaukee Solvents & Chemicals B. State Generator's ID 14765 W. Bobolink Avense - Menomonee Falls, WI 53051 4. Generator's Phone ( 414 252-3550 6. US EPA ID Numb 5. Transporter 1 Company Name C. State Transporter's ID I·L·D·O·Ĝ·9·5·Ĝ·K·1 D. Transporter's Phone 312-596-3377 Mr. Frank, Inc 7. Transporter 2 Company Name 8. US EPA ID Number E. State Transporter's ID F Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc H. Facility's Phone 420 South Colfax Griffith. Indiana 46319 I.N.D.O.1.6.3.6.0.2.6.5 219-924-4370 12. Containers Total 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Туре Waste No. Quantity Waste Flammable Liquid NOS Flammable Liquid, UN1993 D001 GENERATOR Ъ. d.\$ J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources Date Printed/Typed Name Signature Month Day Year RRY 17. Transporter 1 Acknowled Year Printed/Typed Name Signature Day Month 18. Transporter 2 Acknowledgement Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest Item 19. Printed/Typed Na Signature Emergency 24 Hour Assistance Telephone Number BSWM

210KT-50

BSWM Copies 1 & 3 mail to above.

2 - Generator 5 - Generator

3 - BSWM 6 - Transporter

State of Wisconsin Department of Natural Resources
Bureau of Solid Waste Mgt.

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Form 4400-66 Re Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA W.I.D.O.2.3.3.5	ID No. Doct	anifest iment No.	2. Page 1 of <b>1</b>	)		he shaded area by Federal law.
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14765 W. Bobolink Avenue - Menomonee Fa	lls. WI 5305	1		Generator's		<i></i>
4. Generator's Phone ( 414 ) 252-3550		.:	4			
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American Chemical Service Inc.				9180	X90	0002
420 South Colfax	*		H. Facili	ty's Phone		
	.0.1.6.3.6.0	2-6-5	219-	924-437	0	
		12. Cont	ainers	13. Total	14	
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Rev. 7-84

(608-266-3232)

Outside Wisconsin (800-424-8802)

In Wisconsin

Form 4400-66

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2 - Generator 5 - Generator

BSWM Copies 1

3 - BSWM 6 - Transporter

Chapter 144, Wis. Stats. Madison, Wisconsin 53708 (Form designed for use on elite (12-pitch) typewriter.) Please print or type. Information in the shaded areas 1. Generator's US EPA ID No. Manifest Document No. 2. Page 1 UNIFORM HAZARDOUS is not required by Federal law. W-I-D-0-2-3-3-5-0-1-9-2 0-0-1-0-4 WASTE MANIFEST A. State Manifest Document Number 3. Generator's Name and Mailing Address 28304 Milwaukee Solvents & Chemicals 14765 W. Bobolind Avenue - Menomonee Falls, WI 53051 B. State Generator's ID 252-3550 4. Generator's Phone ( 6. US EPA ID Number 5. Transporter 1 Company Name C. State Transporter's ID つつり D. Transporter's Phone 312( 536-3377 I.L.D.O.6.9.5.0.6.1.6.0 8. US EPA ID Number 7. Transporter 2 Company Name E. State Transporter's ID , 451 F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc H. Facility's Phone 420 South Colfax I · N · D · O · 1 · 6 · 3 · 6 · 0 · 2 · 6 · 5 219 924 4370 Griffith, Indiana 46319 12. Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total No. Туре Quantity Waste No. a. Waste Flammable Liquid NOS Flammable Liquid, UN1993 D001 b. N E R A T O R c. d. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations Date and according to the requirements of the Wisconsin Department of Natural-Resources Printed/Typed Name Signature Month Day Year 1.711.712.6 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 1.11 1 18. Transporter 2 Acknowledgement of Reco ipt of Materials Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Emergency 24 Hour Assistance Telephone Number Distribution: 1 - BSWM

Rev. 7-84

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State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Re Chapter 144, Wis. Stats.

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... State of Wisconsin Department of Natural Resources Bureau of Solid Waste Mgt. Box 8094

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Rev. 7-84

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Madison, Wisconsin 53708 (Form designed for use on elite (12-pitch) typewriter.) Please print or type. Manifest Document No. 2. Page 1 Information in the shaded areas 1. Generator's US EPA ID No. UNIFORM HAZARDOUS is not required by Federal law. WASTE MANIFEST 0. 1.1.0.0.2 .3 .3 .5 .0 .1 .9 .2 | 0. 0. 1 .1 .0 A. State Manifest Document Number 3. Generator's Name and Mailing Address 28310 Milwaukee Solvents & Chemicals WI 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051 B. State Generator's ID 4. Generator's Phone ( 414 5. Transporter 1 Company Name 6. US EPA ID Number C. State Transporter's ID Mr. Frank, Inc. I·I·D·O·6·9·5·0·6·1·6·0 8. US EPA ID Number D. Transporter's Phone 312-596-3377 7. Transporter 2 Company Name E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc. H. Facility's Phone 420 South Colfax . Griffith, Indiana 46319 I'N'D'O'1 '6 '3 '6 '0 '2 '6 '5 219-924-4370 12 Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Type No. Waste No. Quantity Wt/Vo a. Waste Flammable Liquid NOS Flammable Liquid, UN1993 D001 ENER Ъ. c. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of PCPA.

15. Special Handling Instructions and Additional Information I also certify the I also certify that I have a program in place to economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources Date Printed/Typed Name Month Day Signature Year 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 100 1.00 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Year Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Printed/Typed N Signature Month Day Year Emergency 24 Hour Assista nce Telephone Numbe Distribution: 1 - BSWM 4 - Facility (608-266-3232) 2 - Generator 5 - Generator Outside Wisconsin (800-424-8802) 3 - BSWM 6 - Transporter

COPY 4

BSWM Copies 1 & 3 mail to above.

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094

Madison, Wisconsin 53708

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Form 4400-66 Re Chapter 144, Wis. Stats.

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Form 4400-66 Rev. 7-84 Chapter 144, Wis. Stats. Box 8094 Madison, Wisconsin 53708 (Form designed for use on elite (12-pitch) typewriter.) Please print or type. Manifest Document 1. Generator's US EPA ID No. 2. Page 1 Information in the shaded areas UNIFORM HAZARDOUS is not required by Federal law. WIDO23350.1.9.200351 of 1 WASTE MANIFEST A. State Manifest Document Number 3. Generator's Name and Mailing Address
Milwaukee Solvents & Chemicals 28351 14765 W. Bobolink Ave - Menomonee Falls, WI 53051 B. State Generator's ID 252-3550 4. Generator's Phone ( 6. US EPA ID Number 5. Transporter 1 Company Name C. State Transporter's ID IL 13006 \$ 506.1.6. Mr. Frank, Inc. D. Transporter's Phone 312-596-3377 8. US EPA ID Number 7. Transporter 2 Company Name E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc H. Facility's Phone 420 South Colfax INDO 1.6.3.6.0.2.6.5 219-924-4370 Griffith, Indiana 46319 12. Containers 13. Total 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Quantity Waste No. a. Waste Flammable Liquid NOS Flammable Liquid, UN1993 Ty TOY.2.0.0 G D001 b. c. d. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA, 15. Special Handling Instructions and Additional Information I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future throat to human health and the environment.

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Emergency 24 Hour Assistance Telephone Number

(608-266-3232) In Wisconsin Outside Wisconsin (800-424-8802) 210 F T-50

Distribution: 1 - BSWM 4 - Facility 2- Generator 5- Generator

3 - BSWM 6 - Transporter BSWM Copies 1 & 3 mail to above.

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Department of Natural Resources
Bureau of Solid Waste Mgt.

Box 8094

Madison, Wisconsin 53708

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Rev. 7-84

Form 4400-66

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Chapter 144, Wis. Stats. Madison, Wisconsin 53708 (Form designed for use on elite (12-pitch) typewriter.) Please print or type. Manifest Document No. 2. Page 1 Information in the shaded areas 1. Generator's US EPA ID No. UNIFORM HAZARDOUS is not required by Federal law. WASTE MANIFEST W· T· D· O· 2· 3· 3· 5· 0· 1· 9· 2 | 0· 0· 8· 5· 4 A. State Manifest Document Number 3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051 B. State Generator's ID 4. Generator's Phone ( 252-3550 6. US EPA ID Number 5. Transporter 1 Company Name 6. US EPA ID Number ; 4.6.6. C. State Transporter's ID Mr. Frank Inc D. Transporter's Phone 312-596-3377 8. US EPA ID Number 7. Transporter 2 Company Name E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc 420 South Colfax H. Facility's Phone Griffith, Indiana 46319 I.N.D.O.1.6.3.6.0.2.6.5 219-924-4370 12. Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit Туре Waste No. No. Quantity Waste Flammable Liquid NOS Flammable Liquid, UN1993 0.0.1 T.T G D001 Ъ. A T O d. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002 (b) RCRA. 15. Special Handling Instructions and Additional Information I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations Date and according to the requirements of the Wisconsin Department of Natural Resources Printed/Typed Name Signature Month Day 1 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 1.1 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Year 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Date Printed/Typed Name Signature Month Day Year トレルル FとE unkeer Emergency 24 Hour Assistance Telephone Number Distribution: 1 - BSWM 4 - Facility (608-266-3232) In Wisconsin 2 - Generator 5 - Generator 3 - BSWM 6 - Transporter Outside Wisconsin (800-424-8802)

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Bureau of Solid Waste Mgt.
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Madison, Wisconsin 53708

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Rev. 7-84

Chapter 144, Wis. Stats.

State of Wisconsin Department of Natural Resources
Bureau of Solid Waste Mgt.

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Box 8094 Madison Wisconsin 53708

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UNIFORM HAZARDOUS  WASTE MANIFEST  1. Generator's US  W. I. D. Q. 2. 3*	EPA ID No. Doc No. 3 · 5 · 0 · 1 · 9 · 2 0 · 0	3.5.7	Page 1 of <b>1</b>	is not re	quired l	the shaded area by Federal law.
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Bureau of Solid Waste Mgt.

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Form 4400-66 Re Chapter 144, Wis. Stats. Rev. 7-84

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#### STATE OF WISCONSIN

Form 4400-66 Rev. 7-84 Chapter 144, Wis. Stats.

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Mail Copies To:

State of Wisconsin Department of Natural Resources Bureau of Solid Waste Mgt. Box 8094

FOR DNR USE ONLY

Madison, Wisconsin 53708 Please print or type. (Form designed for use on elite (12-pitch) typewriter.) 1. Generator's US EPA ID No. Information in the shaded areas 2. Page 1 UNIFORM HAZARDOUS is not required by Federal law. W. I.D.O. 2. 3. 3. 5. 0. 1. 9. 2 0. 0. 3. 5. 9 WASTE MANIFEST of **1** 3. Generator's Name and Mailing Address A. State Manifest Document Number 28359 Milwaukee Solvents & Chemicals WI B. State Generator's ID 14765 W. Bobolink Ave - Menomonee Falls, MI 53051 252-3550 4. Generator's Phone ( 414 6. US EPA ID Number 5. Transporter 1 Company Name C. State Transporter's ID Mr. Famak, Inc I. L. D. O. 6. 9. 5. 0. 6. 1. 6. 0 D. Transporter's Phone 312-596-337 8. US EPA ID Number 7. Transporter 2 Company Name E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID American Chemical Service Inc H. Facility's Phone 420 South Colfax I-N-D-O-1-6-3-6-0-2-6-5 Griffith, Indiana 46319 219-924-4370 12. Containers 14. Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Waste No. Quantity a. Waste Flammable Liquid NOS Planmable Liquid, UN1993 0.0.1 T.TO 5.000 D001 Ъ. N E R c. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Unless I am a small quanity generator who has been exempted by statute or regulation from the duty to make a waste : minimization certification under Section 3002(b) FCRA,
15. Special Handling Instructions and Additional Information I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations Date and according to the requirements of the Wisconsin Department of Natural Resources. Printed/Typed Name Signature Month Day Year 268.6 17. Transporter 1 Acknowledgement of Receipt of Materials Date Month Day Printed/Typed Name Signature Year 18. Transporter 2 Acknowledgement of Receipt of Materials Date Signature Printed/Typed Name Year Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Printed/Typed Name Signature Month Day Year Emergency 24 Hour Assistance Telephone Number Distribution: 1 - BSWM 4 - Facility 212 F. 750 2 - Generator 5 - Generator In Wisconsin (608-266-3232) 6 - Transporter BSWM Copie 4 3 nal 3 Outside Wisconsin (800-424-8802)

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708 FOR DNR USE ONLY

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Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

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	4. Generator's Phone ( 414 ) 252-3550		1			Tone and		Set Francisco
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P.O. Box 7035 Indianapolis, IN 46207-7035

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20. Facility Owner or Operator: Certification of receipt of hazardous materials payered by the manifest except as noted Item 19.	

DO NOT WRITE IN THIS SPACE

P.O. Box 7035

Indianapolis, IN 46207-7035

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

	1 Generator's US EPA			nifest	2. Page 1 of 1	nformation in the	e shaded areas
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EPA Form 8700-22A (Rev. 11-85)

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Form Approved OMB No. 2000 0404 Expires 7 31 86

P.O. Box 7035

Indianapolis, IN 46207-7035 Please print or type. (Form designed for use on elite (12-pitch) typewriter)

	Ma	nifest	2. Page 1 of	Information in th	e shaded areas
WASTE MANIFEST	Docur	nent No.	,	is not required b	Federal law
wrbb2BB5bB9	2941	) 4 B	1		
3. Generator's Name  Milwaukee Solvents & Chemicals				est Document Nu	mber
14765 W. Bobolink Avenue - Menomonee Falls,	MT 570	51	IN 094		
4. Generator's Phone ( 414 ) 252-3550	MI JOU.	JI	B. State Gener	rators ID	
5, Transporter 1 Company Name 6. US EPA ID Number			C. State Trans	nogora ID	20.3
	5050	1 6 0	D. Transporter	<u> </u>	50C 333
Mr. Frank, Inc.     I L D D B B       7. Transporter 2 Company Name     8. US EPA ID Number	<del>5 0 5 ,</del>	<u> </u>	E. State Trans	314	-230-331
	<u> </u>		F. Transporter		
9. Designated Facility Name and Site Address  American Chemical Service Inc.	r		G. State Facili	-	_
420 South Colfax			H. Facility's P	0890	202
Griffith, Indiana 46319 INDOIS	3 6 D	265	219-924	1-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont		13.	14.	1.
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P.O. Box 7035 Indianapolis, IN 46207-7035 Please print or type. (Form designed for use on elite (12-pitch) typewriter) Form Approved OMB No. 2000 0404 Expires 7 31 86 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest information in the shaded areas Document No. WASTE MANIFEST is not required by Federal law WII |D 0 0 2 | 3 | 3 | 5 | 0 | 1 | 9 ± 2 93 0 82 3. Generator's Name MILWAUKEE SOLVENTS & CHEMICALS 14765 WEST BOBOLINK AVENUE - MENOMONEE FALLS, WI 53051 4. Generator's Phone (414 ) 252-3550 5. Transporter 1 Company Name MR. PRANK, INC. I LD 0 69 5 0 61 60 9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE INC. 420 SOUTH COLFAX GRIFFITH, INDIANA 46319 IN DO 1 6 3 6 0 2 6 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers Wate No. Type Quantity Wt/Vol WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID, UN 1993 J. Additional Descriptions for Materials Listed Above 15. Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree. I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to Ξ human health and the environment. Signature 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. Printed/Typed Name 1 0 av 1 vear

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P.O. Box 7035

Indianapolis, IN 46207-7035

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.		inifest ment No.	, - ,	Information in the is not required b	
WASTE MANIFEST	W 1 D 0 2 3 3 5 0 1	U 9 2 al a	ત શ્રા	•		
Generator's Name			<u>.v.o.</u> ;		est Document Nu	mber
MILWAUKEE SOLVEN				IN 09;	3081	
	K AVENUE - MENOMOR		S,	B. State Gener	rator's ID	
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Transporter 1 Company Name  MR. FRANK. INC.	6. US EPA ID Nun		1	C. State Trans D. Transporter		12079
Transporter 2 Company Name	1 L DO 6	nber	11.00	E. State Trans		<u>-596-33</u>
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	ding Proper Shipping Name, Ha	zard Class, and ID Number)	12. Containers No. Type	13. Total Quantity	14. Unit Waste No. Wt/Vol
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7. NUMBEL & TYPE OF	8. GALLONS		9. WASTE NAME	10, US BOT	11. US DOT DENTIFICATION NUMBER	12. PHYSICAL STATE	13. US EPA	14. SHIPPING WEIGHT (Pounds)
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GENERATOR (SHIPPE	R) SECTION	,						
1. COMPANY NAME Milwaukee Sol	vents & Cl	nemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		,
4. P.O. BOX OR STREET P.O. BOX 444		<del>,                                    </del>						
5. CITY, STATE, ZIP CO Butler, WI 53			6. TELEPHONE NUMBER ( 414) - 252-3550			· · · · · · · · · · · · · · · · · · ·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/) Tanker	4200	Waste Flam	mable Liquid NOS	Liquid	UN1993	1. Solid 3. Mixture 2. Liquid	F003	33,600
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TRANSPORTER SECTI	ON		19. EPA IDENTIFICATION	HAZARDOUS WA		SECTION	133 500 15	DENTIFICATION
Mr. Frank, I	nc 🚁 🔻	<b>a</b>	1Lb069506160	American	Chemical'S	Service *		16360265
20. P.O. BOX OR STREET 201 West 155				34. P.O. BOX OR S 420 South				
21. CITY, STATE, ZIP CO South Hollan		/3	22. TELEPHONE NUMBER (312)-596-3377	Griffith,	Indiana 4	6319 -	ì	9-924-4370
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HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

GENERATOR (SHIPPE	R) SECTION	<del></del>					<del></del>		
1. COMPANY NAME	·		2. EPA IDENTIFICATION	vo. 3	3. COMMENTS/SPEC	CIAL INSTRUCTIO	NS		<del></del>
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4. P.O. BOX OR STREE									
P. O. Box 44									·
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER						
Butler, WI 5	3007	,	(414) 252-3550		<del>, </del>	·_ ·	<del></del>	<del>,</del>	<b>,</b>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US-DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/) Tanker	4200	Waste Flam	Waste Flammable Liquid NOS			UN1993	1. Solid 3. Mixture 3	F003	33,600
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18. COMPANY NAME 19. EPA IDENTIFICATION NO.				11				I NO.	16360265
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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

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GENERATOR (SHIPPE)	R) SECTION					<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
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4. P.O. BOX OR STREET P.O. BOX 444	ADDRESS				<b>*</b>			
5. CITY, STATE, ZIP CO Butles, Wisco	onsin 53007	7	6. TELEPHONE NUMBER (414). 252-3550		7			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	÷ 9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
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20. P.O. BOX OR STREET 201 West 155t	h Street			34. P.O. BOX OR ST	Colfax			
21. CITY, STATE, ZIP COI South Holland			22. TELEPHONE NUMBER ( 312) -596-3377	35. CITY, STATE, Z Griffith,	Indiana 4	16319	1	9 924-4370
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29. AUTHORIZED SIGNA	TURE 30. I	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		ssistance Telept (608-266-3232) (800-424-8802)	
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HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Se	olvents &	Chemicals	WIDO23350192			يند		
4. P.O. BOX OR STREE		25. 4.		•				
P. O. Box 4	44			•		. `	N.	
5. CITY, STATE, ZIP CO		<del></del>	6. TELEPHONE NUMBER					
Butler, WI	53007		(414-252-3550)	,				<del>-:</del> :
	<del></del>	<del></del>	_ <del>-</del>	<del></del>	11 US DOT	<del> </del>	<del> </del>	T
7. NUMBER & TYPE OF CONTAINER	8. GALLONS		9. WASTE NAME '	10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE	13. US EPA	14. SHIPPING WEIGHT (Pounds)
·		- 1. chr.		Flammable			WASTECOBE	Treatin (Founds)
(/) Tanker	4500	Waste Fla	ammable Liquid NOS	liquid	UN1993	1. Solid 3. Mixture 3 2. Liquid	F003	36,000
				1	1	1. Solid 3. Mixture	j	1
			· ·	jp.\		2. Liquid		
			(			1. Solid 3. Mixture		·
This is to certify that the ab	ove named mater	als are properly classifie	ed, described, packaged, marked,	15. AUTHORIZED SI	GNATUBE	16. NAME (Print)	J,	17. DATE
			to the applicable regulations Department of Natural Resources,		47 mm	7//	•	SHIPPEO
I also certify that the inform						LOCKO.	WITZ.	41810
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JRANSPORTER SECTI	ON Y A	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	<del></del>	HAZARDOUS WA	STE FACILITY	SECTION		
18. COMPANY NAME		<del>-                                    </del>	19. EPA IDENTIFICATION	32. FACILITY NAN		-	33. EPA 1	DENTIFICATION
Mr. Frank, In	nc.		ILB069506160	American (	Chemical Se	ervice `	TNOO	16360265
20. P.O. BOX OR STREE		<del></del>		34. P.O. BOX OR S				
201 West 155			•	420 South	Colfax			•
21. CITY, STATE, ZIP CO		<del></del>	22. TELEPHONE NUMBER	35. CITY, STATE,		- <del></del>	36. TELE	PHONE NUMBER
South Holland		73	(312)-596-3377	1	Indiana 46	5310 .	(21	9- 924-437
23. COMMENTS	7 22 001	<del></del>	1 312 330 3377	37. COMMENTS	111414114 11	3323		7 744 437
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designated as Hazardous Wa				38. AUTHORIZED	VIGNATURE	39. NAME (Print)	The state of	40.030 0000
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27. 2nd. TRANSPORTER		E	28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted
1			NO.				1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 13	O. NAME (Print)	31. Date Accepted	L	<del></del>		<del></del>	
			` _M / D / Y	46. MAIL TO:	Natural Resources	47. Emergency 24 Hour A	kssistanca Telap (608-266-3232)	
L		<del></del>	<del>:</del>	Bureau of Solid	Waste Management		(800-424-8802	
	A.			Box 8094 Madison, Wiscon	velo 53708	FOR DNR USE ONLY	<del></del>	
			<b>デ か、ノー</b>	Madison, Wiscon	15111 33700			1

HAZARDOUS WASTE FACILITY .

To 210 F.T. 50 BALL 4.4.84

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See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pent press hard. HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81 REV. 6-81

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME Milwaukee So	olvents & (	Chemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	ons .		
4. P.O. BOX OR STREET P. O. BOX 44	T ADDRESS		<del></del>					
S. CITY, STATE, ZIP CO Butler, WI	53007		6. TELEPHONE NUMBER ( 414 - 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
(/) Tanker	4500	Waste Flam	mable Liquid NOS	Liquid	UN1993	1. Solld 3. Mixture 2. Liquid	F003	26000
						1. Solid 3. Mixture 2. Liguid		
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and labeled and are in prope of the U.S. Department of T	er condition for trans Fransportation and ti	sportation according to he EPA and the Wis. D	f, described, packaged, marked, o the applicable regulations epartment of Natural Resources d complete, イントラストリン	15. AUTHORIZED S	IGNATURE	16. NAME (Print)	YOWITC	17. DATE SHIPPED M. D Y
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TRANSPORTER SECTI	ION	. ``	,	HAZARDOUS W.	ASTE FACILITY	SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NA	_		N.O.	DENTIFICATION
Mr. Frank, 1	Inc.		11D069506160	American	Chemical S	ervice	IMDO	16360265
20. P.O. BOX OR STREET	T ADDRESS		<del></del>	34. P.O. BOX OR S	TREET ADDRESS		<del> </del>	
201 West 155	5th Street	••••		420 South	Colfax	Na.		
21. CITY, STATE, ZIP CO	DDE		22. TELEPHONE NUMBER	35. CITY, STATE,	Z IP CODE		36. TELE	PHONE NUMBE
South Hollar	nd. IL 604	73	(312) 596-3377	Griffith.	Indiana 4	6319	(21	9-924-43
23. COMMENTS		· · · · · · · · · · · · · · · · · · ·	,	37. COMMENTS				<del></del>
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in proper condition for trans designa, ed/as Hayardous, Was	sportation and Lackr ste Facility.	lowledge that delivery	shall be made to the facility	38. AUTHOUSE	SIGNAL	39. NAME (Print)		40 Date Scept
24 AUTHORIZED HEINE		NAME (Rrint) 1	26, Obte Accepted	7110	NGGD -	TUURII	25	א ודפי ראי
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in proper condition for trans designated as Hazardous Was	sportation and 1 ackr	nowledge that delivery	shall be made to the facility				NO.	
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepte
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Telep (608-266-3232 (800-424-8802	)
		· ·		Box 8094		FOR DNR USE ONLY		
		100	112 & T.SD GRAY 4.9.84	Madison, Wiscon	nsin 53708			ł
HAZARDOUG WA	מדב בארווות	v	4.7.84			L		

### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDONG WASTE FACILITY

Wisconsin Statutes 144 FORM 4400-66

HAZARDOUS WASTE MANIFEST FORM

REV. 6-81

MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION		· · · · · · · · · · · · · · · · · ·	<del></del>				<del></del>
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee S		Chemicals	WID023350192		Ţ.	•		
4. P.O. BOX OR STREE	T ADDRESS					•		
P.O.Box 444			· · · · · · · · · · · · · · · · · · ·					
5. CITY, STATE, ZIP CO Butler, WI			6. TELEPHONE NUMBER (414)252-3550		<del>-</del> >			
Bucter, MT	33007	·	(414)252 5550	<u> </u>	<del>,                                    </del>	·	<del>,</del>	<del>,</del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
(/) Tanker	1500	Waste Flam	mable Liquid NOS	Liquid	บท1993	1. Solid 3. Mixture 2. Liquid	F003	36,000
			· · · · · · · · · · · · · · · · · · ·			1. Solid 3. Mixture		
					1. 1	1. Solid 3. Mixture 2. Liquid		;
and labeled and are in prope	er condition for tran Fransportation and t	sportation according t he EPA and the Wis. C	Department of Natural Resources.	15. AUTHORIZED SI	COLD	16. NAME (Print) Bubloch	571W0	17. DATE SHIPPED M D Y HILL S
. 3-				a server		45. x <sup>2</sup>		
TRANSPORTER SECT	ION		<u> </u>	HAZARDOUS WA		SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION ILDO69506160	32. FACILITY NAM	Chemical S	ervice		DENTIFICATION
Mr. Frank, In			1110033300100	34. P.O. BOX OR S	•			
201 West 155				420 South				,
21. CITY, STATE, ZIP CO		<del></del>	22. TELEPHONE NUMBER	35. CITY, STATE,			36. TELE	PHONE NUMBER
South Hollan	d, IL 6047	<b>'</b> 3	( 312 596-3377		Indiana 4	6319	(219	9 <sub>)</sub> .924~437
23. COMMENTS				37. COMMENTS		<b>W</b>		
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I hereby certify that the abo	ve named materials	and indicated quantity	(les) has (have) been accepted	I hereby certify that received and amente		terials and Indicated quanti	ty(les) has (hav	e) been
designated as Hazardous Wall 24. AUTHORIZED YONA		NAME (Print)	shall be made to the facility  26. Date Accepted		SIGNATURE	39. NAME (Print)	Sea.	40, Date Accepted
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27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	)
HAZADDONG WA	ome excitia	.v To21	0 £ 7-50 6 CM 4.16.5	Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY		

HAZARDOUS WASTE MANIFEST FORM

REV. 6-81

122164

Wisconsin Statutes 144 FORM 4400-66 See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION		7			:		
1. COMPANY NAME Milwaukee So	lvents & C	hemicals	2. EPA IDENTIFICATION NO. WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
4. P.O. BOX OR STREET P.O.BOX 444		1	1			74		
Butler, WI 5	3007		6. TELEPHONE NUMBER ( 414) 252-3550	' i		·		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14, SHIPPING WEIGHT (Pounds)
(/ ) Tanker	4500	Waste Flam	mable Liquid NOS	Liquid	UN1993	1. Solid 3. Mixture 3	F003	36,000
	}	i	· 			1. Solid 3. Mixture 2. Liquid		
	<u> </u>			15. AUTHORIZED SI	CNATURE	1. Soild 3. Mixture 2. Liquid	<u></u>	17.0075
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TRANSPORTER SECTI	UN		19. EPA IDENTIFICATION	HAZARDOUS WA		SECTION	133 EPA II	DENTIFICATION
Mr. Frank,			120069506160	American	Chemical S	Service		16360265
20. P.O. BOX OR STREE 201 West 15	5th Street	•		34. P.O. BOX OR S	Colfax			
21. CITY, STATE, ZIP CO South Holla		173	22. TELEPHONE NUMBER ( 312) 596-3377	Griffith,	Indiana 4	16319	1	9 - 924-4370
23. COMMENTS				37. COMMENTS			<del></del>	
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24. AUTHORIZED SIGNA		NAME (Print)	CUI-N (M/ DI)	I he eby-certify fat received and accepted	1/00	iterials and indicated quality	ty(ies) has (ha	A STATE
I hereby certify that the abo In proper condition for trans designated as Hazardous Was	portation and I ackr	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	ARDOUS WAST	E FACILITY NAME	42. EPA IC NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44, NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	1
		~ 7	6211RT-50	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

REV. 6-81

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

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GENERATOR (SHIPPER) SECTION						
1. COMPANY NAME Milwaukee Solvents & Chemicals	WIDO23350192	3. COMMENTS/SPE	CIAL INSTRUCTION	NS		•
4. P.O. BOX OR STREET ADDRESS P.O.BOX 444						
5. CITY, STATE, ZIP CODE Butler, WI 53007	6. TELEPHONE NUMBER ( 414) 252-3550					
7, NUMBER & TYPE OF 8. GALLONS 9.	WASTE NAME	10. US DOT HAZARD CLASS Flammable	11. US DOT IDENTIFICATION NUMBER		13. US EPA VASTE CODE	14. SHIPPING WEIGHT (Pounds)
	nable Liquid NOS	Liquid	UN1993	1. Solld 3. Mixture 2. Liquid	F003	3.6,000
		N , :	4	1, Solid 3. Mixture 2. Liquid		
				1. Solid 3. Mixture 2. Liquid	·	
This is to certify that the above named materials are properly classified,	,,,,,,,	15. AUTHORIZED SI		16. NAME (Print)		17. DATE SHIPPED
and labeled and are in proper condition for transportation according to of the U.S. Department of Transportation and the EPA and the Wis. Deficiency that the information contained herein is true, accurate and	partment of Natural Resources.	Robert 7	1 estin	Rubert Hei	ter	4,30,34
TRANSPORTER SECTION		HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME	19.EPA IDENTIFICATION	32. FACILITY NAM	ΛE			DENTIFICATION
Mr. Frank, Inc.	110069505160	American C	hemical Se	rvice	NINE	016360265
20. P.O. BOX OR STREET ADDRESS  201 West 155th Street		34. P.O. BOX OR S 420 South			- <del> </del>	
21. CITY, STATE, ZIP CODE South Holland, IB 60473	22. TELEPHONE NUMBER (312)596-3377	35. CITY, STATE,		319	L	HONE NUMBER ) -924-4370
23. COMMENTS		37. COMMENTS		<del></del>		
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24. AUTHORIZED SIGNATURE 25. NAME (Print)	26. Date Accepted	- HA	UPa)	terials and Indicated quantity		41301 as
I hereby certify that the above named materials and indicated quantity(in proper condition for transportation and I acknowledge that delivery sidesignated as Hazardous Waste Facility.		41. ALTERNATE	<b>9</b>			DENTIFICATION
<u> </u>	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del></del>	15. Date Accepted M / D / Y
29. AUTHORIZED SIGNATURE   30. NAME (Print)	31, Date Accepted M / D / Y	Bureau of Solid	latural Resources Waste Management		istance Teleph 08-266-3232) 00-424-8802)	ı
212	TT-SO GPM	Box 8094 Madison, Wiscon	sin 53708	FOR DAR USE ONLY		
HAZARDOUS WASTE FACILITY						

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See reverse side, Copy 6, for instructions.	
Please type or print clearly using ball point per	n — press hard

HAZARDOUS.WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION					· · · · · · · · · · · · · · · · · · ·		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS	-	
Milwaukee So		hemicals	WID023350192			. 1		
4. P.O. BOX OR STREE	T ADDRESS	3.				7. 1.		
P.O.Box 444	<del> </del>					•,		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					C.
Butler, WI 5	3007		(414)-252-3550	<u></u>	·	<del></del>	<del>,</del>	<del>,</del>
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	٠- و	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(   ) Tanker	4500	Waste Flan	mable Liquid NOS-	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F\$03	210,000
						1. Solid 3. Mixture 2. Liquid		
,						1. Solid 3. Mixture 2. Liquid	<u></u>	
and labeled and are in prope	er condition for tra Fransportation and	nsportation according t the EPA and the Wis. (	d, described, packaged, marked, to the applicable regulations Department of Natural Resources, and complete.	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	ع تر رون	17. DATE SHIPPED M D X
TRANSPORTER SECT	101		<del></del> (.	LIAZA BDOVĆW	ACTE EACH ITY	CCCTION		
18. COMPANY NAME	ION	<del></del>	19. EPA IDENTIFICATION	HAZARDOUS W		SECTION	33. EPA II	DENTIFICATION
Mr. Frank, In	n.c. : : : : : : : : : : : : : : : : : :	i karanga	ILD069506160	American	Chemical	Sarrica	NO.	16360265
20. P.O. BOX OR STREE	T ADDRESS	A Ar h	I IBBOOSSOGIOO	34. P.O. SOX OR S	TREET ADDRESS	<del></del> -	LINDO	10200503
201 West 155	th Street			420 South		t 4		,
21. CITY, STATE, ZIP CO	DDE	<del></del>	22. TELEPHONE NUMBER .	35. CITY, STATE,	ZIP CODE	····	36. TELE	PHONE NUMBER
South Holland	1. IL 6047	73	(312) 596-3377	Griffith	Indiana	46319	121	9-924-4370
235 COMMENTS				37. COMMENTS				<u> </u>
			:					
			·					
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		•		ľ				
I hereby certify that the abo	ove named materials	and Indicated quantit knowledge that deliver	y(les) has (have) been accepted y shall be made to the facility	I hereby certify that received and accepte 38. AUTORIZED	the above of med ma	aterials and indicated quant	ity(ies) has (hav	
designated as Hazardous War 24. AUTHORIZED SIGNA		. NAME (Print)	26. Date Accepted	171	nseal	FDUV/	E!	Accepted
11 111111111111111111111111111111111111	11/2	1000 NIN 11	10.10	I hereby certify that received and accepte				
in proper condition for trans designated as Hazardous Was	sportation and I acl ste Facility.	knowledge that deliver	y (lest has (have) been accepted y shall be made to the facility	41. ALTERNATE H	IAZARDOUS WAST	E FACILITY NAME	42. EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	ATURE 30	. NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Telepi (608-266-3232) (800-424-8802)	•
	,		: v	Day 0004	•	FOR DNR USE ONLY	(000-424-0002)	

#### STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

MANIFEST HUMBER

GENERATOR (SHIPPE	R) SECTION						·		
1. COMPANY NAME			2, FRA 19547 1515 AT 191	NO.	3. COMMENTS/SPE	CIALINSTRUCTIO	NS		
Milwaukee So		Chemicals	RETHERESKHIM	}		, 0			
4. P.O. BOX OR STREE	T ADDRESS		- v			1			
P.O B cx 444	}	•		ļ					
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER	₹		•			
Butler, WI 5	3007		(414)252-355	0					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	<del></del>	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(/ )Tanker	4200	Waste Flam	mable Liquid N	os	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	23600
		,					1. Solid 3. Mixture 2. Liquid		
·	1		:				1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tra Fransportation and	nsportation according to the EPA and the Wis. D	epartment of Natural Resour	1	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	owit	17. DATE SHIPPED M D Y
4:	<del></del>	· · · · · · · · · · · · · · · · · · ·				, , , , , , , , , , , , , , , , , , ,	· <del></del>		
TRANSPORTER SECTI	ION	<del></del>			HAZARDOUS WA	ASTE FACILITY	SECTION		
Mr. Frank, LI	ne.	a dispression	19. EPA IDENTIFICATION 12. EPA IDO69506160	* .	32. FACILITY NAM	Chemical:	Service	INDC	DENTIFICATION 16360265
20. P.O. BOX OR STREET 201 West 1551	th Street		.,		34. P.O. BOX OR S 420 Sout!	h Colfax			
South Holland		73	( 312) -596-33	1	35. CITY, STATE,	ZIP CODE , Indiana	46319	I	PHONE NUMBER 1924-4370
23. COMMENTS			*.		37. COMMENTS				
7.5%	•						•		
I hereby certify that the abo	ove named material	s and indicated quantity	(les) has (have) been accente	, <u>a</u>	I hereby certify that	the above named ma	aterials and indicated quant	lty(les) has (ha	ve) been
in proper condition for trans designated as Hazardous Was	sportation and I ac	knowledge that delivery	(les) has (have) been accepte shall be made to the facility		received and recepte 38. AUTHORIZED	d	39_NAME (Print)	-	40. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accept	ted Y	JA Ma	R. F. Comme	iter als and indicator quanti	ty (ies) has (hay	B/84
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	sportation and 1 ac	s and indicated quantity knowledge that delivery	(les) has (have) been accepter shall be made to the facility	d			E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	7	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30	. NAME (Print)	M / D /		Bureau of Solid	Vatural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)
ż		/2 ( a	7		Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY	<del></del>	

HAZARDOUS WASTE MANIFEST FORM

REV. 6-81

122168

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

Wisconsin Statutes 144 FORM 4400-66

GENERATOR (SHIPPE	R) SECTION		,					
1. COMPANY NAME		<u> </u>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	)NS		
Milwaukee Sol		Chemicals	WID023350192			•		
4. P.O. BOX OR STREE	T ADDRESS		Ross,					
P.O.Box 444		<del></del>				<b>1</b>		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Butler, WI 53	3007		(414)-252-3550		<del>,</del>	<del>,</del>		,
7. NUMBER & TYPE OF CONTAINER	8. GALLON	is ( · / ×	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4200	Waste Flam	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	33,600
	i		. · 			1. Solid 3. Mixture 2. Liquid		
•	 		••			1: Solid 3. Mixture 2. Liquid	<u> </u>	
and labeled and are in prope	r condition for ransportation a	transportation according ind the EPA and the Wis.	id, described, packaged, marked, to the applicable regulations Department of Natural Resource <b>会社</b> nd complete.	Jany allon 1	a to in	Gray A Ord	etrick	SHIPPED M D Y S17 184
			;					
TRANSPORTER SECTI	ON		,	HAZARDOUS W		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM		_	33. EPA 10	DENTIFICATION
Mr. Frank, Ir	•	120069506160		Chemical :	Service	INDO.	16360265	
20. P.O. BOX OR STREE	ADDRESS	· <del></del>		34. P.O. BOX OR S	,			
201 West 155t	h Stree	t	j	420 South	n Colfax	•		
21. CITY, STATE, ZIP CO	DE	1.0	22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE		I	PHONE NUMBER
South Holland	1. IL 60	473	(312) 596-3377		, Indiana	46319	(21	9·924-4370
23. COMMENTS		<del></del>	V-12	37. COMMENTS	<del></del>	<del></del>	<del> </del>	
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						<i>A</i> .		1
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		J.						
I hereby certify that the abo	ve named mate	that and indicated quantity	y (les) has (have) been accepted	I hereby certify that	the above named ma	aterials and indicated quant	ity/ies) has (have	el heen
In proper condition for trans designated as Hazardous Was	portation and	acknowledge that deliver	y shall be made to the facility	received and accepte 38. AUTHOR ZED	SIGNATURE	30 WANE (Print)		10. Date Accepted
24. AUTHORIZED SIGNA		25. NAME (Print)	26, Date Accepted	1 1/1	$H \rightarrow I$	T-(); X 177	3"	Mar Der July 1
1. 1. N. 1. C. 2.	. ~		100 / D / CKIL	L Deretty cectify that	the order pamed ma	iterials and indicated quant	itulias) bas (bay	2, 7,891
I hereby certify that the abo in proper condition for trans	ve named mate portation and	rials and indicated quantit	y(les) has (have) been accepted y shall be made to the facility	41. ALTERNATE H	AZ PROUS WAST	E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER		_	28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATIVE	44, NAME (Print)		5. Date Accepted
2.1 and Firming On Let	-5m /41 ije		NO.	-3. AUTHORIZED	SIGNATURE	INDIAN (KIMI)		M / D / Y
29. AUTHORIZED SIGNA	ATURE	30, NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management	47. Emergency 24 Hour F  An Wisconsin Outside Wisconsin	Assistance Telepi (608-266-3232) (800-424-8802)	
		ว	108 +=50	Box 8094 Madison, Wiscon	-	FOR DNR USE ONLY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81 MANIFEST NUMBER

GENERATOR (SHIPPE	R) SECTION						<del></del>		
1. COMPANY NAME	, , , , , , , , , , , , , , , , , , , ,	м. ,	2. EPA IDENTIFICATIO	MINO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	lvents & C	hemicals	WID02335019	21					Ï
4. P.O. BOX OR STREET									
P.O.Box 444	14			í			*		
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBE	P					
Butler, W 15	3007		(414) 252-35	50	<del>,</del>	r	·	<del>,</del>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
// Tanker	4200	Waste Flam	mable Liquid	NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	23/000
	1. / 1. * * * * * * * * * * * * * * * * * * *					,	1. Solid 3. Mixture 2. Liquid		;\
•		i piati	The second has	(Wile	Commence (September 1997)		1. Solid 3. Mixture	3 4	. • •
This is to certify that the ab and labeled and are in prope of the U.S. Department of T I also certify that the inform	r condition for trans ransportation and th	portation according to se EPA and the Wis. D	the applicable regulations epartment of Natural Reso	,	5. AUTHORIZED SI	GNATURE )	16. NAME (Print)	Lowie	17. DATE SHIPPED M D Y
TRANSPORTER SECTI	ON			<u> </u>	HAZARDOUS W	ASTE FACILITY	SECTION		<del></del>
18. COMPANY NAME	ON		19. EPA IDENTIFICATION	NO.	32. FACILITY NAM		3LCTION .	33. EPA 1	DENTIFICATION
Mr. Frank, Inc. ILD069506160				1 1 ش	Amorican C	homianl Co		INDO:	16360265
20. P.O. BOX OR STREET	ADDRESS	<del></del>	TTINOOSSAGTON	<del>' </del>	American C	TREET ADDRESS	TVICE		
201 West 155	th Street				420 South	Colfax	•		
21. CITY, STATE, ZIP CO			22. TELEPHONE NUMB	ER	35. CITY, STATE, ZIP CODE 36. TELEPHONE NUM				
South Holland	d, IL 6047	3	(312)596-33	77	Griffith, Indiana 46319 (219 924-				
23. COMMENTS	•	·	1		37. COMMENTS		<del>-</del>	<del> </del>	
	e podre		•						
}		•**		} }					ļ
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**·		•	•						
I hereby certify that the abo	ve named materials	and indicated quantity	(ies) has (have) been accen		I hereby certify that	the above named ma	aterials and indicated quant	ty(les) has (hav	re) been
in proper condition for trans designated as Hazardous Was	portation and I ackn	lowledge that delivery	shall be made to the facilit	, X	received and agreente	SIGNATORE	39. NOME (Print)		40. Date Accepted
24 AUTHORYZED SIGNA	TURE 25.	NAME (Print)	26. Date Acce		Lin	the above name	terals and indicated duant	-6-	5 1084
		in Vac Vin	V. 1 × 1 - 1	<u> </u>	receive and accepted	d. <i>D</i>		17 EDA 11	DENTIFICATION
in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.							· · · · · · · · · · · · · · · · · · ·	NO.	
27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION NO.					43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Acce M / D /		Bureau of Solld	Natural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	) ,
			7100		Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY		

Please type or print clearly using ball point pen - press hard.

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66, REV. 6-81

MANIFEST NUMBER

122170

GENERATOR (SHIPPE	R) SECTION		,			······································		(1)
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	lvents & Cl	nemicals	WID023350192	₩.				
4. P.O. BOX OR STREE	T ADDRESS		·					
P.O.Box 444			As	•				
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER	:		*		
Butler, WI 53	3007		414-252-3550	m .	<del>,</del>	<del></del>	,	,
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	· 10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Flam	mable Liquid NOS	Flammable Liquid	עע 1993	1. Solid 3. Mixture 3	F003	36,000
		ق	<b>i</b>			1. Solid 3. Mixture 2. Liquid		
,			· · · · · · · · · · · · · · · · · · ·			1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for trans Fransportation and ti	sportation according to he EPA and the Wis. D	epartment of Natural Resources.	Jany (Man.	<u> </u>	Larry A Dict	\	MACHE SHIPPED Y
TRANSPORTER SECTI	ION			HAZARDOUS W	ASTE FACILITY	SECTION		<sub>1</sub>
18. COMPANY NAME					ИE	<del></del>	33. EPA I	DENTIFICATION
Mr. Frank, Ir	ic.		IED069506160 🛪	American (	Chemical Se	ervice	INDO	16360265
20. P.O. BOX OR STREET 201 West 155t			·	34. P.O. BOX OR S 420 South				
21. CITY, STATE, ZIP CO South Holland		3	22. TELEPHONE NUMBER ( 312) .596-3377	35. CITY, STATE,	Indiana 46	5319		9-924-4370
23. COMMENTS				37. COMMENTS				
		<b>,</b>						}
		Yes .	· · · · · · · · · · · · · · · · · · ·					
		<b>' Y</b> ''	*					1
		<i>;</i> · ·			. ;			į.
			4-1-1-1	I hereby certify that	the above named ma	terials and indicated quant	tulias) has thau	e) been
In proper condition for trans designated as Hazardous Was	sportation and I ackr reprachity.	nowledge that delivery	(les) has (have) been accepted shall be made to the facility	received and accepte 38. AUTHURIZED	SIGNATURE	39. NAME (Print)		40. Date Accepted
1/ // // // //	V 7./	NAME (Bring)	new 26-Date Accepted			terials and indicated quanti	ty(les) has (hav	e) been
I hereby certify that the abo in proper condition for trads designated as Hazardous Was	e named materials a sportation and I acknote Facility.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H	AZARDOUS WAST	E FACILITY NAME	42, EPA II NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28 EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	ſ	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Telepi (608-266-3232) (800-424-8802)	)
	. '	2/01	KT-50	Box 8094 Madison, Wiscon	· · · · · · · · · · · · · · · · · · ·	FOR DNR USE ONLY		

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

Madison, Wisconsin 53708

FOR DNR USE ONLY

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See reverse side. Copy 6, for instructions.

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lease type or print clearly		pen – press nard.	<u> </u>					
GENERATOR (SHIPPE	R) SECTION					···		
1. COMPANY NAME			2. EPA IDENTIFICATION NO	. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol		Chemicals	WID023350192	]				
4. P.O. BOX OR STREE	T ADDRESS							
P.O.Box 444		····		1				
5. CITY, STATE, ZIP CO			6. TELEPHONE NUMBER					
Butler, WI 5	3007	<del></del>	(414)-252-3550	<del></del>	r	<del></del>	<del></del>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	g	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Flam	mmable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3 2. Liquid	F003	36,000
						1. Solid 3. Mixture 2. Liquid		
•						1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tra Fransportation and	nsportation according t the EPA and the Wis. (	d, described, packaged, marked, to the applicable regulations Department of Natural Resources. nd complete.	Jam Clam		Lary A. Orc	t eich	17. DATE SHIPPED M D Y S/18/84
· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·		<u> </u>		
TRANSPORTER SECTI	ION			HAZARDOUS WA		SECTION		
18. COMPANY NAME			19. EPA IDENTIFICATION	32. FACILITY NAM	- · · <del>-</del>		33. EPA 11	DENTIFICATION
Mr. Frank, II	nc.		ILD069506160	American (	Chemical S	ervice	IED01	6360265
201 West 1551	th Street	<del></del>	122. TELEPHONE NUMBER	420 South		<del></del>	136 76.67	PHONE NUMBER
		•		1			]	
South Holland	d, 1L 604	/3	312 596-3377	GILITIEN,	Indiana 4	9379		9· 924-437
								·
I hereby certify that the abo	ve named materials	and indicated quantity	y (les) has (have) been accepted	received and accepted	d//	terials and Indicated quan		
			y shall be made to the facility	38. AUTHORIZED	SIGNATURE -	39. NAME (Print)		40. Date Accepted
24. AUTHORIZED SIGNA	<b></b>	، NAME (Print) ۲۲، درکی بزنزگ ۲۲۰، ۱۷	JIN 26. Date Accepted	I hereby certify that received and accepted	ine above named ma	CRMURPA terials and indicated quan	tivy(les) has (hav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials sportation and I act ste Facility.	and indicated quantity knowledge that delivery	y (les) has (have) been accepted y shall be made to the facility	41. ALTERNATE H	AZANDOUS WAST	E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30	NAME (Print)	31. Date Accepted  M / D / Y	Bureau of Solid V	latural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	Assistance Teleph (608-266-3232) (800-424-8802)	l .
				Box 8094	İ	FOR DAIR LISE CALLY	<del></del>	<del></del>

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION	<del></del>	<del></del>					
I. COMPANY NAME	<del></del>	<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol		hemicals	WIDO83350192					•
P.O.Box 444	I ADDRESS							
5. CITY, STATE, ZIP CO	DE		6. TELEPHONE NUMBER	1				
Butler, WI 53	3007		(414)-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
Tanker	4,200	Waste Flam	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	40,800
7.						1. Solid 3. Mixture 2. Liquid	,	
• .		•	N		,	1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	r condition for tran ransportation and	sportation according to the EPA and the Wis. D	epartment of Natural Resources.	Juni Colon	DATION	Larry A Die	trich	17. DATE SHIPPED M D Y 5 DY/84
				<i>C:</i>		7 3		
TRANSPORTER SECTI	ON			HAZARDOUS WA		SECTION		 ===================================
18. COMPANY NAME		***	19. EPA IDENTIFICATION NO.	32. FACILITY NAM	•	•	NO	DENTIFICATION
Mr. Prank, I	nc.		ILD069506160	American (	Chemical S	ervice	TMDC	16360265
20. P.O. BOX OR STREET			·	,				
201 West 155	<u>th Streed</u>	<del></del>	22. TELEPHONE NUMBER	420 South			136 76.6	PHONE NUMBE
		· •		, , ,	Indiana 4	6210	1	9) -924-437
South Holland	1. IL 6047	/3	312 596-3377	37. COMMENTS	indiana 4	0313	, '213	7 724-437
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			e*		A			
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and I ack	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	I hereby certify that received and accounte	the artive named made.	aterials and indicated quant	ity(les) has (ha	ve) been
24. AUTHORIZED SIGNA	<u> </u>	NAME (Print)	26. Date Accepted	1180	Well.	terlais and indicated quanti		272
1/211/1/11/19	17/60	701.00 AUVO OU	(les) has (have) been accepted	received and accepte	<b>7</b>	E FACILITY NAME		DENTIFICATION
n proper condition for trans to proper condition for trans designated as Hazardous Was	portation and I ack	and indicated quantity nowledge that delivery	shall be made to the facility	11. ALIERNATER	INTAUROUS MASI	ET ACIEITT NAME	NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		M / D / Y
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted M / D / Y		latural Resources Waste Management	47. Emergency 24 Hour A In Wisconsin Outside Wisconsin	(608-266-3232	)
			211E-7-50	Box 8094 Madison, Wiscon	•	FOR DNR USE ONLY.	1000-424-8802	,

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME		· · · · · · · · · · · · · · · · · · ·	2. EPA IDENTIFICAT	10N NO.	3. COMMENTS/SPEC	IAL INSTRUCTIO	NS		
Milwaukee So	lvents & (	Chemicals	WID023350192						
Milwaukee So	T ADDRESS								
P.O.Box 444									
5. CITY, STATE, ZIP CO	DE		6. TELEPHONE NUM	BER					
Butler, WI 5	3007		<sup>(</sup> 414 <sup>)</sup> 252-3	3550	<del>,</del>	·	<del>, </del>	<del>,</del>	,
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Flam	mable Liquid	NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38,250
			·	-			1. Solid 3. Mixture 2. Liquid		
				- 3			1. Solid 3. Mixture 2. Liquid		
This is to certify that the abland labeled and are in prope of the U.S. Department of I lalso certify that the inform	or condition for tran Transportation and t	sportation according to he EPA and the Wis. De	the applicable regulation partment of Natural Res	ns	First allow	NATURE	Lastif A. Osc	luch	17. DATE SHIPPED M D 5/27/84
L <del> </del>			<del> </del>	- <u>V</u>	()	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	1		·
-TRANSPORTER SECTI	ON			·	HAZARDOUS WA	STE FACILITY	SECTION!		
18. COMPANY NAME	1.2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		19.EPA IDENTIFICAT	1011	32. FACILITY NAM	E		33. EPA II	DENTIFICATION
Mr. Frank, T	nc.	• •	TIDO6950616	ا ـ مُن	American	Chemical S	ervice		6369265
Mr. Frank, I	T ADDRESS		· · · · · · · · · · · · · · · · · · ·		34. P.O. BOX OR \$7	REET ADDRESS			
201 West 155	th Street				420 South	Colfax			
21. CITY, STATE, ZIP CO	DE		22. TELEPHONE NUM	BÉR	35. CITY, STATE, Z	IP CODE		_	HONE NUMBER
South Hollan	d, IL 604	73	312 <sup>1</sup> 596-3	377	Griffith,	Indiana 4	6319	219	924-4370
23. COMMENTS	**************************************			76	37. COMMENTS				
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I hereby certify that the abo in proper condition for trans designated as Hazardous Was	sportation and I ack	nowledge that delivery	shall be made to the faci	ility	received and accepted 38. AUT PORIZED S	·	39. NAME (Print)		10. Date Accepted
24, AUTHORIZED SIGN		NAME (P(Ipt)	26. Date Ac		41)11.1	eal	FOLIATES		472784
1/10kg 1/2 16	While the	=1 16 1/1.	No 5758	18/1/	I hereby certify that treceived and accepted	he above named ma	terials and indicated quanti	ty(ies) has (have	el been
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27. 2nd. TRANSPORTER			28. EPA IDENTIFICAT		43. AUTHORIZED S	IGNATURE	44. NAME (Print)	14	15. Date Accepted
		j	NO.	~				İ	M/D/Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Ac		46! MAIL TO: Department of N			(608-266-3232)	)
	· · · · · ·	7.00			Box 8094	Vaste Management	Outside Wisconsin	(800-424-8802)	<del></del>
		2124	T.50 121		Madison, Wiscons	in 53708	TON DINK OSE ONEY		

### HAZARDOUS WASTE MANIFEST FORM

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE)	R) SECTION 📑			•				
1. COMPANY NAME		,	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	lvents & C	hemicals	WID023350192			•		1
4. P.O. BOX OR STREET	ADDRESS							
P.O.Box 444						:		·
5. CITY, STATE, ZIP CO	DE .	<del> </del>	6. TELEPHONE NUMBER			, , , , , , , , , , , , , , , , , , ,		
Butler, WI 53	3007	•	414-252-3550			·( 3		ł
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I			11, US DOT			14. SHIPPING
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	WEIGHT (Pounds)
	4,500			Flammable	UN1993	1. Solid 3. Mixture 3	F003	38,250
Tanker	7,500	Waste Flam	mable Liquid NOS	Liquid	UN1393	2. Liquid	1003	37,00
						1. Solid 3. Mixture 2. Liquid		
			¥		·	1. Solid 3. Mixture 2. Liquid		
			, described, packaged, marked,	15. AUTHORIZED S	GNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in proper of the U.S. Department of 7			the applicable regulations appartment of Natural Resources.	.0	< :_	1.		MDY
I also certify that the inform				Jan allen	Juctivick	Harris A Dietr	nc h	5130/84
	1 Ewi	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	, té	** () - ** 10°	<del></del>	<del></del>		
TRANSPORTER SECTI	ON			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME	*	32. FACILITY NAM	ME		33. EPA II	DENTIFICATION		
Mr. Frank, Inc. ILD069506160				American	Chemical S	ervice		16360265
Mr. Frank, To	T ADDRESS			34. P.O. BOX OR S		<u> </u>		
201 Wast 155	th Street		•	420 South	Colfax		•	
201 West 155	OE		22. TELEPHONE NUMBER	35. CITY, STATE,	ZIP CODE	<del></del>	36. TELE	PHONE NUMBER
South Hollan	d. TT. 6047	· 2	1312-596-3377	Griffith.	Indiana 4	6319	(219	924-4370
23. COMMENTS	10 11 01 4.	<del></del>		37. COMMENTS		<u> </u>		324 4370
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I hereby certify that the abo	ve named materials	and indicated quantity	(les) has (have) been accepted shall be made to the facility	I hereby centry that	the appre named ma	terials and indicated quanti	les as that	Local SV
in proper condition for trans designated as Hazardous Was	sportation and I acki ste Facility.	nowledge that delivery	shall be made to the facility	received and accepte	SIGNATURE	39. NAME PALVE	15	40. Date Accept d
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	. 26. Date Accepted	The	West of the second			M / D / Y ]
111 St. St. St.		UN PLACE	0 1201041	I hereby certify that	the above named ma	terials and Indicated quantil	y(les) has (hav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materials in portation and I acknote Facility.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility			E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	<del></del>	45. Date Accepted
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29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted	L		<u> </u>	<u>_</u>	
	1		M / D / Y	46. MAIL TO: Department of N	Natural Resources	47. Emergency 24 Hour As	isistance Telepi 608-266-3232)	
L	<u></u>	<del></del>		Bureau of Solid	Waste Management		800-424-8802	
			<b>~11</b>	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		
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HAZARDOUS WASTE FACILITY

See reverse side; Copy 6, for instructions.

Please type or print clearly	y using ball poir	nt pen — press hard.	•:	, .			:		
GENERATOR (SHIPPE	R) SECTION	<u> </u>					<del></del>		
1. COMPANY NAME	• •		2. EPA IDENTIFIC	ATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	Trante C	Chemicale	WID0233503	192			<b>A</b> .		
4. P.O. BOX OR STREE	T ADDRESS	CHOMACOAD	1.11.11.11.11.11.11.11.11.11.11.11.11.1	•		•	*		
P.O.Box 444		:		".					
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE N	UMBER			1,4		
Butler, WI 5	3007	.:	( )-				, ·		
7. NUMBER & TYPE OF	-		_l	<del></del>	10. US DOT	11. US DOT	12. PHYSICAL STATE	13. US EPA	14. SHIPPING
CONTAINER	8. GALLONS	9	. WASTE NAME		HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)		WEIGHT (Pounds
Tanker	4,500	Wasta Flan	mable Liqu	ank bi	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38,250
TAIINGL		HASLE TION	menta neda	<u> </u>			1. Solid 3. Mixture	1 2 2 2	
	<u> </u>		```				2. Liquid	<u> </u>	
							1. Solid v3. Mixture		
This is to certify that the ab					15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED
and labeled and are in property of the U.S. Department of					6		And march		MDY
I also certify that the inform					Jany allan &	Orchiol 120	Larry & Diet	uch	6/1/81
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TRANSPORTER SECT	ON AS	4° j		f :	HAZARDOUS WA		SECTION ·		<del> ·</del>
18. COMPANY NAME			19.EPA IDENTIFIC	CATION	32. FACILITY NAM			33. EPA 1 NO.	DENTIFICATION
Mr. Frank. I	Mr. Frank Inc.  O. P.O. BOX OR STREET ADDRESS.					TREET ADDRESS	ervice	LND01	6360265
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201 West 155	th Street	·	22, TELEPHONE N		420 South	Colfax	· —	136 75.6	PHONE NUMBER
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South Holland	<u>1. IL 604</u>	73	312 59	6-3377	Griffith,	Indiana 4	6319		9 924-437
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i		<b>.</b>	• • • • • • • • • • • • • • • • • • • •	}					
I hereby certify that the abo	ve named materia	is and Indicated quantity	y(les) has (have) been	accepted	I hereby certify that	the above named ma	terials and indicated quanti	ty(ies) has (hav	ve) been
In proper condition for trans designated as Hazardous Was	sportation and I asste battisty.	cknowledge that delivery	y shall be made to the	facility	38. AUTHORIZED	SIGNATURE	39. 47AM (Print)	-	40 Date Accepted
24 AUTHORIZED STONA	YURE 2	5 NAME (Print)	26. Date	Accepted	188	the com	1 -1) (/Nr	Teas ve	W1918
1- 1W/	Muruk	E MIC	50@NIG/	1274	I hereby certify that received and accepted	the above named ma	terials and indicated quanti	ty(les) has (hav	e) been
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	ve named materia sportation and I acte Facility.	is and indicated quantity cknowledge that delivery	y(les) has (have) been y shall be made to the	accepted facility	41. ALTERNATE H		E FACILITY NAME	42, EPA II NO.	DENTIFICATION
27. 2nd, TRANSPORTER			28. EPA IDENTIFIC	CATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	45. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	TUDE	O. NAME (Print)	131 0-10	Accepted	<u></u>		L		
Z3. AUTHORIZED SIGNA	JUNE 3	U. NAME (Print)		D / Y		latural Resources Waste Management		(608-266-3232	)
					Box 8094	vvaste ivianagement	Outside Wisconsin	(800-424-8802	,
	i				Madison, Wiscon	sin 53708	I OK DIAK OSE ONEY,	• •	1

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION						·	
1. COMPANY NAME		· · · · · · · · · · · · · · · · · · ·	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukae Sola	rents & Che	mials	WID023350192			·		
P.O. Box 444 5. CITY, STATE, ZIP CO	DDE	<del></del>	6. TELEPHONE NUMBER	-		•		[
D. 43 777 53/	207		(414)-252-3550					į
Butler, WI 530	10.7		414 252-3550		11. US DOT	T.,		14 5111001110
7. NUMBER & TYPE OF . CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,200	Waste Flan	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	35,200
			·			1. Solid 3. Mixture 2. Liquid		
					}	1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for trans Transportation and ti	portation according to ne EPA and the Wis. Do	epartment of Natural Resources.	Jany (Clan	Diehed	Larry A Dict	۰۰،د۲	17. DATE SHIPPED M D Y
				. ()	<del></del>	·		<del></del>
TRANSPORTER SECT	ION			HAZARDOUS WA	ASTE FACILITY	SECTION		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM	ME		33. EPA 10	DENTIFICATION
Mr. Frank, In	T ADDRESS		TLD069506160	Américan (	Chemical So	ervice	INDO:	16360265
201 West 155			res (	420 South				
21. CITY, STATE, ZIP CO	DDE		22. TELEPHONE NUMBER	. 35. CITY, STATE,			36. TELEF	HONE NUMBER
South Holland	1, IL 60473		(312)-596-3377	Griffith,	Indiana 46	6319	(219	9 · 924-437d
23. COMMENTS				37. COMMENTS				
I hereby certify that the abo in proper condition for tran- designated as Hazardous Wa	ove named materials a sportation and I ackr ste Facility.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	received and accepte 38. AUTHORIZED	the above named made. SIGNATURE	aterials and indicated quant	ty (les) has (have	
24. AUTHORIZED SIGN	ATURE 25.	NAME (Print)	26. Date Accepted	TNIM	مستعريم في زم	ווטעדן ו	~ ~	80/ 50/ 84
melidion	2 - the	AM LAND	元 16/5 以	I hereby certify that	thorabove named ma	iterials and indicated quanti	(y(ics) has (have	) been
I hereby certify that the abo in proper condition for tran- designated as Hazardous Wa	sportation and I ackr	ind indicated quantity lowledge that delivery	(les) has (have) been accepted shall be made to the facility			E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME		28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5, Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	- 31. Date Accepted M / D / Y	Bureau of Solid	Natural Resources Waste Management		ssistance Teleph (608-266-3232) (800-424-8802)	
		21	1 L T-50.	Box 8094 Madison, Wiscon	nsin 53708	FOR DNR USE ONLY		

43. AUTHORIZED SIGNATURE

Madison, Wisconsin 53708

Department of Natural Resources

Bureau of Solld Waste Management

46. MAIL TO:

Box 8094

44. NAME (Print)

In Wisconsin

FOR DNR USE ONLY

Outside Wisconsin

47. Emergency 24 Hour Assistance Telephone Number

(608-266-3232)

(800-424-8802)

45. Date Accepted M / D / Y

See reverse side, Copy 6, for instructions.

27. 2nd. TRANSPORTER COMPANY NAME

HAZARDOUS WASTE FACILITY

29. AUTHORIZED SIGNATURE

Please type or print clearly using hall point pen - press hard.

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GENERATOR (SHIPPE	RI SECTION	<del></del>	<del></del>			<del></del>		
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	N5		
Milwaukee Sol	Lvents & C	hemicals	WID023350192					
P.O.Box 444	. •	. •	1			, <b>š</b>		}
5. CITY, STATE, ZIP CO	DE	<del></del>	6. TELEPHONE NUMBER			· · · · · ·		)
Butler, WI 5;	3007		(414)252-3550			<del>, </del>	т	,
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4500	Waste Flan	mmable Liquid NOS	Flammable Liquid	UN1993	1. Solld 3. Mixture 3	F003	38250
		,				1. Solid 3. Mixture 2. Liquid		
		· · · · · · · · · · · · · · · · · · ·				1. Solid 3. Mixture		
and labeled and are in prope	r condition for trans ransportation and ti	sportation according the EPA and the Wis. [		Fernallan	Dieture	Larry A De	a rrch	SHIPPED
		· · · · · · · · · · · · · · · · · · ·		U		7		
TRANSPORTER SECTI	ON	١;		HAZARDOUS WA		SECTION		
18. COMPANY NAME	•	W	19. EPA IDENTIFICATION	32. FACILITY NAM			NO.	DENTIFICATION
Mr. Frank II	nc.		ILD069506160	American (	Chemical S	ervice	INDOL	6360265
i		,						
201 West 155	th Street		T22. TELEPHONE NUMBER	420 South	Colfax	<del> </del>	136 76166	HONE NUMBER
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South Holland	1, II 6047	3	312 596-3377	Griffith,	Indiana 4	6319	, 21	9 924-437
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I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lacki	and indicated quantit nowledge that delivery	y(les) has (have) been accepted y shall be made to the facility	I hereby covify in the received and accide to 38. AUTHORIZED	the above named ma	aterials and indicated quantil 39. NAME (Print)	ty(les) has (hav	e) been 10. Date Accepted
24. AUTHORIZED SIGNA	TURE 25.	NAME (Print)	26. Date Accepted	I hereby certify that received and accepted	M 00 /	J-1)///		6/9/184
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and I ackr	and indicated quantity	y (les) has (have) been accepted y shall be made to the facility	41. ALTERNATE H			42. EPA IE NO.	DENTIFICATION

28. EPA IDENTIFICATION NO.

31. Date Accepted

M / D / Y

30. NAME (Print)

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

A 124257

GENERATOR (SHIPPE	JERATOR (SHIPPER) SECTION						<u> </u>	
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .	* * * * * * * * * * * * * * * * * * * *	
Milwaukee So	lvents & C	hemicals	WID023350192		9	•		
4. P.O. BOX OR STREE	T ADDRESS	7	4.	· <b>%</b> ·				
P.O.Box 444	٠	•		•	•			
5. CITY, STATE, ZIP CO	DDE		6. TELEPHONE NUMBER					•
Butler, WI 5	3007		(414)-252-3550		,	··········	<del></del>	· · · · · · · · · · · · · · · · · · ·
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,200	Waste Flam	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	35,70
						1. Solid 3. Mixture	•	🚧
				٠ کین	٠.	1. Solid 3. Mixture 2. Liquid		
			, destribed, packaged, marked,	15. AUTHORIZED SI	GNATURE	16. NAME (Print)	<del></del>	17. DATE SHIPPED
and labeled and are in proper of the U.S. Department of " I also certify that the inform	Transportation and t	the EPA and the Wis. D	epartment of Natural Resources.	Lung allan	Dachul	Larry A Dict	21ch	6 127184
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TRANSPORTER SECT	ION	· · · · · · · · · · · · · · · · · · ·		HAZARDOUS W		SECTION		
18. COMPANY NAME 19. EPA IDENTIFICATION NO.				32. FACILITY NAM	-	_	NO.	DENTIFICATION
Nr. Frank, Inc. ILD069506160 20. P.O. BOX OR STREET ADDRESS				American 34. P.O. BOX OR S	Chemical Trees		INDOT	6360265
						•		7 (2)
201 West 155	th Street		22. TELEPHONE NUMBER	420 Sout	I COLIAX	<del></del> ;	136. TELER	HONE NUMBER
			312 596-3377	4.	, Indiana	46210	,	924-4370
South Hollan	d, IL 5047	<u> </u>	312 396-3377	37. COMMENTS	, Indiana	40313		324-4370
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Vet ,		· · · · · · · · · · · · · · · · · · ·		<u> </u>	Λ		_ <u>·</u>	
in proper condition for tran	sportation and I ack	and indicated quantity	(les) has (have) been accepted shall be made to the facility	I hereby cered that received and a center 30. AUTHOF/125D	the above named mad.	iterials and indicated quanti	<u> </u>	
designated as Hazardous Wa		NOME (D.1-4)		30. AUTHORIZED	SIGNATURE	39-MANE (Print)	La programa	Or Date Accepted
71 Year ore	7 South	NAME (Print)	M DO KX	I heroby certify that received and accepted	ty above named ma	terals and indicated quantil	ty(les) has (have	6 2734 e) been
I hereby certify that the abo in proper condition for tran- designated as Hazardous Wa	ove named materials sportation and I ack ste Facility.	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41. ALTERNATE H		E FACILITY NAME	42. EPA ID NO.	ENTIFICATION
27. 2nd TRANSPORTER		f:-	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	]4	M / D / Y
29. AUTHORIZED SIGNA	31. Date Accepte M / D / Y				46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number Department of Natural Resources In Wisconsin (608-266-3232)			
	210 F T-50 13				sin 53708	Outside Wisconsin FOR DNR USE ONLY	(800-424-8802)	
HAZARDOUS WA	STE FACILIT	Y	1.6	Y.		<u> </u>		

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

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See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPE	R) SECTION							
1. COMPANY NAME 2. EPA IDENTIFICATION NO				3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .	:	
Milwaukee Solvents & Chemicals   WID023350192						, }		
4. P.O. BOX OR STREET	ADDRESS	<del> </del>						
P.O.Box 444		•				,		
5. CITY, STATE, ZIP CODE			6. TELEPHONE NUMBER			,		
Butler, WI 53007			(414)-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	Tanker 5000 Waste Flan		mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	3000
						1. Solid 3. Mixtura 2. Liquid		
,						1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab- and labeled and are in prope of the U.S. Department of T I also certify that the inform	portation according to be EPA and the Wis, D	15. AUTHORIZED SI	AND COLOR	16. NAME (Print)	. ( .	17. DATE SHIPPED M D Y		
TRANSPORTER SECTI		HAZARDOUS WASTE FACILITY SECTION						
18. COMPANY NAME 19. EPA IDENTIFICATION				32. FACILITY NAME 33. EPA IDENTIFICATION				
Mr. Frank. In	nc.	·	NO. ILD069506160	American Chemical Service			INDO1	6360265
201 West 155th Street				420 South Colfax				
21. CITY, STATE, ZIP CODE			22. TELEPHONE NUMBER	35. CITY, STATE, ZIP CODE				PHONE NUMBER
South Holland, IL 60473			312 596-3377	Griffith, Indiana 46319			(219) 924-4370	
				I hereby white that	the above named ma	terials and indicated over	Ily/ps) has /ha	el baro
I hereby certify that the abo in proper condition for trans designated as Hazardous Was		received an increase.  38. AUTHUR JED	SIGNATURE	terials and Indicated quant	3 8	40 Mate Accepted		
24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted				I hereby certify that	the upove named ma	terials and indicated quant	Ity(les) has (hav	e) bean
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lackn	nd indicated quantity owledge that delivery	(ies) has (have) been accepted shall be made to the facility	41. ALTERNATE H	A RDOUS WAST	E FACILITY NAME	42. EPA 10 NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAME	<u> </u>	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	1	M / D / Y
29. AUTHORIZED SIGNA	NAME (Print)	46. MAIL TO:  Department of Natural Resources Bureau of Solid Waste Management  47. Emergency 24 Hour Assistance Telephone Number (608-266-3232)  Outside Wisconsin (800-424-8802)				)		
		2.	12 F T-50	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY		

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE FACILITY

# HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

124259

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GENERATOR (SHIPPE	R) SECTION	·		<del></del>				
1. COMPANY NAME	<del></del>	<del></del>	2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	INS		
Milwaukee So	lvents &	Chemicals	WTD023350192					}
4. P.O. BOX OR STREE	T ADDRESS					•		·
P.O.Box 444								[
5. CITY, STATE, ZIP CO	DE	<del></del>	6. TELEPHONE NUMBER	İ				
Butler, WI 5	3007		(414)252-3550	<u> </u>		·	<del></del> _	,
7. NUMBER & TYPE OF CONTAINER	8. GALLON	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		14. SHIPPING WEIGHT (Pounds)
Tanker	5,500	Waste Plam	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	46,950
		· ·			·	1. Solid 3. Mixture 2. Liquid	3	
				1		1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for	transportation according t	d, described, packaged, marked, o the applicable regulations Department of Natural Resources.	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y
l also certify that the inform				James Melan	Drewin	Law A. Die	lrich	7/12/84
		<del></del>		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	1	15. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<del></del>
TRANSPORTER SECT	ION		19, EPA IDENTIFICATION	HAZARDOUS WA		SECTION		
18. COMPANY NAME		32. FACILITY NAM	ME		33. EPA 11	DENTIFICATION		
Mr. Frank Inc. ILD069506160				American (	Chemical S	ervice	1	6360265
1				34. P.O. BOX OR S	TREET ADDRESS			
201 West 155	th Stree	t	22. TELEPHONE NUMBER	420 South	Colfax	<del></del>	136 75.5	HONE NUMBER
1		•	22. TELEPHONE NUMBER			<b>:</b> ,		
South Holland	d, IL 60	473	312 /596-3377	Griffith.	Indiana 4	6319		924-4370
25. COMMENTS		•		J		***		j
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24. AUTHORIZED SIGNA	• 1	25. NAME (Print)	26. Date Accepted	I hereby Left in that	v que	iterals and Indicated quant	(4)	11000
I hereby certify that the abo	ve named mate sportation and	, , , , , , , , , , , , , , , , , , ,	(les) has (have) been accepted (shall be made to the facility	received and accepte	d /	E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted M / D / Y
29. AUTHORIZED SIGNA	ATURE	30. NAME (Print)	31. Date Accepted M / D / Y		Natural Resources	47. Emergency 24 Hour / In Wisconsin	(608-266-3232)	none Number
		711E	T-50 1040013TU	Bureau of Solid ' Box 8094 Madison, Wiscon	Waste Management isin 53708	Outside Wisconsin	(800-424-8802)	

27. CO.

See reverse side, Copy 6, for instructions.

RDOUS WASTE FACILITY

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

REV. 6-81

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GENERATOR (SHIPPE	R) SECTION	· · · · · · · · · · · · · · · · · · ·				Å ;		<del></del>	
1. COMPANY NAME	<del></del>	<del></del>	2. EPA IDENTIFI	CATION NO.	3. COMMENTS/SPEC	IAL INSTRUCTIO	ONS		
Milwaukee So	lvents &	Chemicals	WID023350	1192		• .			
4. P.O. BOX OR STREE	T ADDRESS	,			A			1 h	
P.O.Box 444		<i>∄</i> - ≠	•	7.5	an safar 💉		,		• •
5. CITY, STATE, ZIP CO	DDE	4.	6. TELEPHONE N	NUMBER		• .			
Butler, WI 5	3007		(414 )- 25	52-3550			•	٠	
7. NUMBER & TYPE OF	8. GALLONS		WASTE NAME	· · · · · · · · · · · · · · · · · · ·	. 10. US DOT	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL ST		
CONTAINER	8. GALLONS	-\	WASTE NAME			NUMBER	· · · · · · · · · · · · · · · · · · ·		ODE WEIGHT (Poun
Tanker	4,500	Waste Flamm	able Liqui	La nos	Flammable Liquid	UN1993	1.5olid 3. Mixture 2. Liquid	3 F003	38,250
	Í		·				1. Solid 3. Mixture 2. Liquid		
·•							1. Solid 3. Mixture 2. Liquid		
This is to certify that the ab and labeled and are in prope					15. AUTHORIZED SIG	SNATURE	16. NAME (Print)	:	17. DATE SHIPPED M D Y
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TRANSPORTER SECTI	IUN		19. EPA IDENTIFI	CATION	HAZARDOUS WA		SECTION	133 5	PA IDENTIFICATIO
			NO.		\			N	0.
Mr. Frank, I 20. P.O. BOX OR STREE	nc.	· ·	_ILD069506	5160	American C	hemical Se	ervice	LIN	0016360265
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201 West 155	th Street		22. TELEPHONE	NUMBER	420 South	Colfax		136 7	ELEPHONE NUMBE
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South Hollan 23. COMMENTS	d, IL 604	73	312_59	96-3377	Griffith.	Indiana 46	5319		219 <sup>'</sup> 924-431
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I hereby certify that the abo in proper condition for tran- designated as Hazardous War	sportation and I aci ste Facility.	knowledge that delivery	shall be made to the	facility	38. AUTHOPIZED S	IGNATURE :	39. NAME (Print)	519 and	40. Date Accept
24/ AUTHORIZED SIGNY	ATURE 25	. NAME (Print)	26. Date	e Accepted	101	1. 100	1 HOUSE	F. F. 755	17/244 Y
110/1 1/in 160	hacets	W Y com V Garlis	からハグケ	#11:34X	I hereby certify that t	he segre hanted ma	aterials and indicated of	uantity(ies) has	(have) Been
hereby certify that the abo in proper condition for trans designated as Hazardous Wa	ove named materials sportation and I aci ste Facility.	and indicated quantity knowledge that delivery	es) has (have) been shall be made to the	accepted facility	41. ALTERNATE HA	AZARDOUS WAST	E FACILITY NAME	42.EF	'A IDENTIFICATIO
27. 2nd. TRANSPORTER			28, EPA IDENTIFI		43. AUTHORIZED S	IGNATURE	44. NAME (Print)		45. Date Accept
			NO.	1					M / D / Y
29. AUTHORIZED SIGNA	ATURÉ 30	. NAME (Print)	31. Date M /	e Accepted D / Y	46. MAIL TO: Department of N	atural Resources	47. Emergency 24 H in Wisconsin	(608-266-3	232)
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See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144

REV. 6-81

MANIFEST NUMBER

124261

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GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 3. COMMENTS/SPECIAL INSTRUCTIONS 2. EPA IDENTIFICATION NO. Milwaukee Solvents & Chemicals
4. P.O. BOX OR STREET ADDRESS WID023350192 P.O.Box 444

S. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Butler. WI 53007 11. US DOT IDENTIFICATION NUMBER 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) CONTAINER HAZARD CLASS (Enter number in box) 1. Solid 3. Mixture 3 Flammable 4500 6250 2. Liquid F003 Waste Plammable Liquid NOS Liquid UN1993 1. Solld 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Llquid 16. NAME (Print) This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete. TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 18. COMPANY NAME 19. EPA IDENTIFICATION 32. FACILITY NAME 33. EPA IDENTIFICATION American Chemical Service
34. P.O. BOX OR STREET ADDRESS Mr. Frank Inc. ILD069506160 INDO16360265 201 West 155th Street 420 South Colfax 35. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER (219) 924-4370 South Holland, IL 60473 Griffith. Indiana 46319 23. COMMENTS I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted I hereby certify that the above named materials and indicated quantity (les) has (have) been received and accepted.

38. AUTHORIZED SIGNATURE

39. NAME (Print) 40. Date in proper condition for transportation and t acknowledge that delivery shall be made to the facility designated as Hazardous Waste Pacility. 40. Date Accepted 24. AUTHORIZED SIGNATURE 26. Date Accepted Hereby certify that the above named materials and indicated quantity (les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME 42. EPA IDENTIFICATION designated as Hazardous Waste Facility. 27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION NO. 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M / D / Y Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802) Box 8094 211E T-50 FOR DNR USE ONLY

FORM 4400-66

HAZARDOUS WASTE FACILITY

10800 BTU/LB; 1% Cl

Madison, Wisconsin \$3708

124262

See reverse side, Copy 6, for instructions, Please type or print clearly using ball point pen - press hard. HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION								
1. COMPANY NAME			2. EPA IDENTIFICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS	·		
Milwankee So	Twents s.C	hemicals	WID023350192	1		A CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR		·	
Milwaukee So 4. P.O. BOX OR STREET	ر ADDRESS			1	•	•			
P.O.Box 444	·		•						
5. CITY, STATE, ZIP CO	DE	<del></del>	6. TELEPHONE NUMBER	1					
Butler. WI 5	2007	<u> </u>	(414) 252-3550i			•	•		
· ·	1001	<u> </u>	7.14		11. US DOT	12. PHYSICAL STATE	13. US EPA	14. SHIPPING	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	(Enter number in box)		WEIGHT (Pounds)	
	45.00	_	,	Flammable		1. Solid 3. Mixture 3		Elina .	
(/) Tanker	73.00	Waste Flamm	able Liquid NOS	Liquid	UN1993	2. Liquid	F003		
						1. Solid 3. Mixture 2. Liquid			
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This is to certify that the ab	ove named materials	are properly classified	, described, packaged, marked,	15. AUTHORIZED SI	GNATURE	16. NAME (Print)		17. DATE SHIPPED M D Y	
and labeled and are in prope of the U.S. Department of T I also certify that the inform	Fransportation and ti	he EPA and the Wis. Do	epartment of Natural Resources.	John L. P. J.	A. C.A.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	•	ارد تنز احتراجز	
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TRANSPORTER SECTI	ON	· · · · · · · · · · · · · · · · · · ·		HAZARDOUS WA	ASTE FACILITY	SECTION	<del></del>		
18. COMPANY NAME			19.EPA IDENTIFICATION	32. FACILITY NAM			33. EPA 10	DENTIFICATION	
Wr Frank T	5.0		NO. ILDO69506160	American C	hemical Se	rvice		6360265	
Mr. Frank T	ADDRESS	المستحدد المتاريخ		34. P.O. BOX OR S	TREET ADDRESS				
201 West 155	th Street			420 South	Colfax	•			
201 West 155	DE		22. TELEPHONE NUMBER	420 South	ZIP CODE		36. TELEP	HONE NUMBER	
South Hollan	d. IL 6047	'3	(312)596-3377	Griffith, Indiana 46319 (219) 924-4370					
23. COMMENTS	,			37. COMMENTS	· · · · · · · · · · · · · · · · · · · · · · · · · ·				
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I hereby certify that the abo	ve named materials a	and indicated quantity	(les) has (have) been accepted.	I hereby certify that	the above name ma	terials and indicated quanti	ty(ies) has (have	e) been	
designated as Hazardous Was	iportation and I ackr ite Facility.	nowledge that delivery	(les) has (have) been accepted, shall be made to the facility	38. AUTHORIZED.	SIGNATURE	39. NAME (Print)	- Ama 4	Q-Date Accepted	
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	- 4		- ) \land 1/1	1-26 /	ダイり	
Stola Vin 10	11111	Vind Vind	(ynic) 3/8/	I hereby certaly that received and accepted	the above panion	terials and indicated quanti	ty(les) has thave	e) been	
i prereby certify that the abo in proper condition for trans designated as Hazardous'Was	ve named materials a portation and I acknowled	and indicated quantity nowledge that delivery	(les) has (have) been accepted shall be made to the facility	41: ALTERNATE H		E FACILITY NAME	42. EPA 10 NO.	ENTIFICATION	
27. 2nd. TRANSPORTER			28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	14	5. Date Accepted M / D / Y	
29. AUTHORIZED SIGNA	TURE 30.	NAME (Print)	31. Date Accepted		<del></del>	<del></del>			
		· · · · · · · · · · · · · · · · · · ·	M / D / Y	46. MAIL TO: Department of N Bureau of Solid N	latural Resources Waste Management		ssistance Teleph (608-266-3232) (800-424-8802)	one Number	
			2128 T-SO 12,5	OO Box 8094 Madison, Wiscon		FOR DNR USE ONLY			
HAZARDOUS WA	פידי דארווויז	v	1,	r. Cl					

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400 66 REV. 6-81

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Please type or print clearl	y using ball point	pen — press hard.	FORM	M 4400-66	· REV. 6-81			
GENERATOR (SHIPPE	R) SECTION			•		<del></del>		······································
1. COMPANY NAME			2. EPA IDENTIFICATION NO	. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So.	lvents & C	hemicals	WID023350192	· ·				
4. P.O. BOX OR STREE	T ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7				
P.O.Box 444	· · · · · · · · · · · · · · · · · · ·	<b>-</b> .			:			
5. CITY, STATE, ZIP CO	ODE	<del></del>	6. TELEPHONE NUMBER	-				·
Butler, WI 5	3007		(414)252-3550			•		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
Tanker	Tanker 4,500 Waste Flamm		mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38250
			100		·	1. Solid 3. Mixture 2. Liquid		
		,			-	1. Solid 3. Mixture 2. Liquid		<u> </u>
			d, described, packaged, marked,	15. AUTHORIZED S	IGNATURE	16. NAME (Print)		17. DATE SHIPPED
	Transportation and t	he EPA and the Wis. C	o the applicable regulations Department of Natural Resources. and complete.	La Cellan	Dehil	Line, A Oset	rick	8, है हैं।
·			· · · · · · · · · · · · · · · · · · ·	· (*)		·		- <del> </del>
TRANSPORTER SECT	ION	<del></del>	lio son institution	HAZARDOUS W.	ASTE FACILITY	SECTION	33.550.0	DENTIFICATION
18. COMPANY NAME 19. EPA IDENTIFICATION NO.							NO.	DENTIFICATION
Mr. Frank, I	Mr. Frank, Inc. ILDO69506160				Chemical Set Reference Chemical Set Trees Chemical Set Trees Chemical Set Trees Chemical Set Trees Chemical Set	ervice	L_INDO	16360265
201 West 155	th Street		22. TELEPHONE NUMBER	420 South	Colfax		[36 TELE	PHONE NUMBER
1		•						
South Holland	d. 11 604/	3	312 596-3377	Griffith, 37. COMMENTS	Indiana 4	6319		9 924-437
I hereby certify that the above		and indicated quantily	/(les) has (have) been accepted	I hereby certify that	the above named ma	iterials and indicated quanti	ty(les) has (hav	e) been
in proper condition for tran designated as Hazardous Wa	sportation and I ack	nowledge that delivery	shall be made to the facility	received and accepte 38. AUTHORIZED	d	39. NAME (Print)		40. Date Accepted
24. AUTHORIZED SIGN		NAME (Print)	26. Date Accepted			, , , , , , , , , , , , , , , , , , , ,	1	M/D/Y
11/1/1/1/1/1/	ell L	DONNED HI	BULT 81818189	I hereby certify that	the above named ma	terials and indicated quantit	y(les) has (hav	e) been
I hereby certify that the abo in proper condition for tran- designated as Hazardous Wa				E FACILITY NAME		DENTIFICATION		
27. 2nd. TRANSPORTER	COMPANY NAME	:	28, EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)	-	45. Date Accepted M / D / Y
Salald Sala	STURE 30.	NAME (Print) DAR. 10 FSch		Contract of Carlo	Natural Resources Waste Management		isistance Telepi 608-266-3232) 800-424-8802)	)
		2128	T-50 12800 B	Bureau of Solid Box 8094 Madison, Wiscon	isin 53708	FOR DNR USE ONLY		

## HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144

124264

See reverse side, Copy 6, for instructions. FORM 4400-66 REV. 6-81 Please type or print clearly using ball point ben - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Sovlents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS P.O.Box 444 6. TELEPHONE NUMBER 5. CITY, STATE, ZIP CODE (414)252-3550 Butler, Wisconsin 53007 11. US DOT IDENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 8. GALLONS 9. WASTE NAME HAZARD CLASS (Enter number in box) WASTE CODE WEIGHT (Pounds CONTAINER Flammable 1. Solid 3. Mixture 3 5,000 **F**003 Tanker Waste Flammable Liquid NOS Liquid UN1993 2. Liquid 1. Solid 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid 15. AUTHORIZED SIGNATURE 16. NAME (Print) 17. DATE This is to certify that the above named materials are properly classified, described, packaged, marked, SHIPPED and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. A. Weltich 2/13/84 Larin Laiso certify that the information contained herein is true, accurate and complete. HAZARDOUS WASTE FACILITY SECTION TRANSPORTER SECTION 18. COMPANY NAME 32. FACILITY NAME 33. EPA IDENTIFICATION 19. EPA IDENTIFICATION NO. American Chemical Service
34. P.O. BOX OR STREET ADDRESS INDO16360265 Mr. Frank, Inc. ILD069506160 20. P.O. BOX OR STREET ADDRESS 420 South Colfax 35. CITY, STATE, ZIP CODE 201 West 155th Street
21. CITY, STATE, ZIP CODE 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER South Holland, II, 60473 (312)596-3377 Griffith, Indiana 46319

I hereby certify that the aboye named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and t acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

AUTHORIZED SIGNATURE

26. Qate Accepted

Increby certify that the above named materials and indicated quantity (less has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

30. NAME (Print)

27. 2nd. TRANSPORTER COMPANY NAME

28. EPA IDENTIFICATION

29. AUTHORIZED SIGNATURE

31. Date Accepted

204/2 T.50 10200 BTU/LB 2.6 % CO

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708

43. AUTHORIZED SIGNATURE

received and a project.
38. AUTHOR ZEUS

47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)

42. EPA IDENTIFICATION

45. Date Accepted M / D / Y

NO.

FOR DNR USE ONLY

I hereby certify that the above named materials and indicated quantity (ies) has (have) been

44. NAME (Print)

above named materials a

41. ALTERNATE HAZARDOUS WASTE FACILITY NAME

124265

See reverse side, Copy 6, for instructions. Please type or print clearly using ball point pen - press hard. Wisconsin Statutes 144 FORM 4400-66 REV. 6-81

GENERATOR (SHIPPE	R) SECTION	<del></del>	<del></del>	<del></del>	;		<del> </del>	
1. COMPANY NAME	· · · · · · · · · · · · · · · · · · ·		2. EPA IDENTIFICATION N	O. 3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee Sol	lvents & C	hemicals	WID023350192					
4. P.O. BOX OR STREE	T ADDRESS.	į		7 '		•		
P.O.Box 444	<del></del>		,	,				
5. CITY, STATE, ZIP CO		w.	6. TELEPHONE NUMBER		•			,
Butler, WI 5	3007	<del></del>	(414)252-3550		1	T	1	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9.	WASTE NAME/	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Flam	mable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38,250
						1. Solid 3. Mixture 2. Liquid		
	<u>, , , , , , , , , , , , , , , , , , , </u>	,	F			1. Solid 3. Mixture 2. Liquid		
and labeled and are in prope	er condition for tran Transportation and t	sportation according to he EPA and the Wis. D	epartment of Natural Resources	11 - 1	Dietur	Larry A Diet	iich	SHIPPED M D Y
TRANSPORTER SECTI	ION	<del></del>	<del> </del>	(/	ASTE FACILITY	SECTION	<del></del>	
18. COMPANY NAME	1014		19, EPA IDENTIFICATION	32. FACILITY NAME		SECTION	33. EPA 11	DENTIFICATION
Mr. Frank II	T ADDRESS	<b>4</b>	TLD069506160	American 34. P.O. BOX OR S	Chemical Settle Address	ervice	NO.	16360265
201 West 155	th Street	•		420 South	Colfax	•		
201 West 1551	DE	•	22. TELEPHONE NUMBER	35. CITY, STATE,	Z IP CODE		36. TELE	PHONE NUMBER
South Holland	1, IL 6047	3	312 596-337	Griffith, 37. COMMENTS	Indiana 4	6319	219	924-4370
			•					
			14					
	•	<u>.</u> .	• •			•		
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	portation and Lack	and indicated quantity nowledge that delivery	(ies) has (have) been accepted shall be made to the facility	I hereby certify that received appropriate 38. AUTHORNAZED	the above named ma	aterials and indicated quanti		e) been 40. Date Accepted
24. AUTHORIZED SIGNA		NAME (Print)	26. Date Accepted	YKIA	rife en	terials and indicated quanti	in the second	8716189
I hereby certify that the abo in proper condition for trans designated as Hazardous Was	we named materials sportation and I ack		(les) has (have) been accepted shall be made to the facility	receiving and accepte	AZARDOUS WAST	E FACILITY NAME		DENTIFICATION
27. 2nd. TRANSPORTER		, . V	28. EPA IDENTIFICATION NO.	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		15. Date Accepted
29. AUTHORIZED SIGNA	ATURE 30.	NAME (Print)	31. Date Accepted M / D / Y		Natural Resources Waste Management		ssistance Telept (608-266-3232) (800-424-8802)	)
			210E	Box 8094 - Madison, Wiscon 10700 13TU/213		FOR DNR USE ONLY		
HAZARDOUS WA	STE FACILIT	Y NT 100 tokko na zonobomo ni	T-50	1.7% CP.				

# HAZARDOUS WASTE MANIFEST FORM

124266 Wisconsin Statutes 144 See reverse side. Copy 6, for instructions. FORM 4400-66 REV. 6-81 Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvants & Chedical
4. P.O. BOX, OR STREET ADDRESS P.O.Box 444 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Butler. WI 53007 11. US DOT 14. SHIPPING 13. US EPA 7. NUMBER & TYPE OF 10. US DOT 12. PHYSICAL STATE 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) HAZARD CLASS NUMBER (Enter number in box) CONTAINER Flammable 1. Solid 3. Mixture 3 2. Liquid F003 UN1993 Waste Flammable Liquid NOS Liquid 1. Solid 3. Mixture 2. Liquid 1. Solid 3. Mixture 2. Liquid . 16. NAME (Print) This is to certify that the above named materials are properly classified, described, packaged, marked, SHIPPED and labeled and are in proper condition for transportation according to the applicable regulations D of the U.S. Department of Transportation and the EPA and the Wis, Department of Natural Resources: I also certify that the information contained herein is true, accurate and complete. A LANGE TRANSPORTER SECTION HAZARDOUS WASTE FACILITY SECTION 19. EPA IDENTIFICATION NO. 18. COMPANY NAME 32. FACILITY NAME 33. EPA IDENTIFICATION American Chemical Service
34. P.O. BOX OR STREET ADDRESS ILD069506160 IND016360265 420 South Colfax 35. CITY, STATE, ZIP CODE 201 West 155th Street 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER South Halland, II. 6047 Griffith, Indiana 46319 I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. I hereby ce received a AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted 42. EPA IDENTIFICATION in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. ÑO. 27. 2nd. TRANSPORTER COMPANY NAME 28 EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted

30. NAME (Print)

2/14 T-50 12200 BTU/16

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094

Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number In Wisconsin . (608-266-3232) Outside Wisconsin (800-424-8802)

M / D / Y

FOR DNR USE ONLY

29. AUTHORIZED SIGNATURE

31. Date Accepted

Please type or print clearly using ball point pen - press hard.

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE FACILITY

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 **REV. 6-81** 

GENERATOR (SHIPPER) SECTION 3. COMMENTS/SPECIAL INSTRUCTIONS 1. COMPANY NAME 2. EPA IDENTIFICATION NO. Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS P.O.Box 444 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER Butler, WI 53007 414-252-3580 11. US DOT IDENTIFICATION NUMBER 10. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 8. GALLONS 9. WASTE NAME HAZARD CLASS WASTE CODE WEIGHT (Pounds) CONTAINER (Enter number in box) Flammable 1. Solid 3. Mixture 3 Waste Flammable Liquid NOS Liquid UN1993 F003 2. Liquid Tanker 1. Solid 3. Mixture 2. Liquid 1, Solid 3. Mixture 2. Liquid 16. NAME (Print) 15. AUTHORIZED SIGNATURE This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete. HAZARDOUS WASTE FACILITY SECTION TRANSPORTER SECTION 32. FACILITY NAME 18. COMPANY NAME 19. EPA IDENTIFICATION 33. EPA IDENTIFICATION American Chemical Service
34. P.O. BOX OR STREET ADDRESS Mr. Frank, Inc. T.DO69506160 TND016360265 20. P.O. BOX OR STREET ADDRESS 201 West 155th Street
21. CITY, STATE, ZIP CODE 420 South Colfax 35. CITY, STATE, ZIP CODE 36. TELEPHONE NUMBER 22. TELEPHONE NUMBER 312 596-3377 South Holland, IL 60473 Griffith, Indiana 46319 23. COMMENTS Thereby certify that the apove named materials and indicated quantity(les) has (have) been received and agronted.

38. AUTHOR ZED SYNTAMBE 39 NAME Peint) I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted pove named materials and indicated quantity (les) has (have) been 42. EPA IDENTIFICATION 41. ALTERNATE HAZARDOUS WASTE FACILITY NAME I hereby certify that the above named materials and indicated quantity (les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 27. 2nd. TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number MIDIY Department of Natural Resources In Wisconsin (608-266-3232) Bureau of Solid Waste Management Outside Wisconsin (800-424-8802) Box 8094 2104 T-50 FOR DNR USE ONLY Madison, Wisconsin 53708

DEPARTMI See reverse side, Copy 6, Please type or print clearl		·			RDOUS WASTE MA sin Statutes 144 400-66	ANIFEST FORM	A	124	268
GENERATOR (SHIPPE	R) SECTION &	<del></del>	<del></del>					•	
1. COMPANY NAME	· · ·		2. EPA IDENTIFICAT	ION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS		
Milwaukee So	lvents & (	Chemicals	WID02335019	2		•	•		
4. P.O. BOX OR STREE	T ADDRESS		<u> </u>				i		
P.O.Box 444		•					·		
5. CITY, STATE, ZIP CO	ODE		6. TELEPHONE NUME	BER .			•		
Butler, WI 5	3007	*	(414) 252-3	550			•		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	, 9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Blamm	mable Liquid	nos	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38,250
							1. Solid 3. Mixture 2. Liquid		
				·	4		1. Solid 3. Mixture 2. Liquid		
This is to certify that the all and labeled and are in propof the U.S. Department of I also certify that the inform	er condition for tran Transportation and t	nsportation according t the EPA and the Wis. D	o the applicable regulation Department of Natural Res	ns	Fruit (Illin	Si Ir	16. NAME (Print)	tricky	SHIPPED M D Y
	, ŧ	. <b>Q</b> 6 - 2.	<del>), , , , , , , , , , , , , , , , , , , </del>		.0	1 .	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
TRANSPORTER SECT	ION				HAZARDOUS WA		SECTION		
18. COMPANY NAME			19.EPA IDENTIFICAT	ION	32. FACILITY NAM	AE.		33. EPA II	DENTIFICATION
Mr. Frank, 1	nc.		ILD06950616	0	American C	hemical Se	rvice		6360265
20. P.O. BOX OR STREE	T ADDRESS	•.	· <u></u>		34. P.O. BOX OR S				
201 West 159	ith Stradt				420 South	Colfax			

7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pound
Tanker	4,500	Waste Blam	nable Liquid	NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture 3	F003	38,250
							1. Solid 3. Mixture 2. Liquid		
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	·	Λ. σ.	, , , , , , , , , , , , , , , , , , , ,		0	1 .			
TRANSPORTER SECT	ION				HAZARDOUS WA		SECTION		
18. COMPANY NAME	•		19. EPA IDENTIFICA	ATION	32. FACILITY NAM	1E		33. EPA 1	DENTIFICATION
Mr. Frank,			ILD0695061	.60	American C	hemical Se	rvice		16360265
20. P.O. BOX OR STREE	T ADDRESS	· · · · · · · · · · · · · · · · · · ·			34. P.O. BOX OR ST	TREET ADDRESS			
201 West 159	5th_Stredt			j	420 South	Colfax			
21. CITY, STATE, ZIP C	ODE		22. TELEPHONE NU	MBER	35. CITY, STATE, 2	IP CODE		36. TELE	PHONE NUMBER
South Hollar	nd. IL 604	73	<sup>(312)</sup> 596-	-3377	Griffith,	Indiana 46	319	(219	9 <sup>) -</sup> 924-437
23. COMMENTS					37. COMMENTS				
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I hereby certify that the ab	ove named materials	and indicated quantity	(les) has (have) been ac	cepted	I hereby certify that	the above named ma	iterials and indicated quant	ty(les) has (ha	ve) been
in proper condition for trandesignated as Hazardous Wa	nsportation and 1 aci aste Facility.	knowledge that delivery	shall be made to the fa	icility	Jeceived and accented	SIGNITURE	301 MADLE (Print)	1-4	40. Date Accepte
24. AUTHORIZED SIGN	ATURE 25	. NAME (Print)	26. Date F	Accepted		WY THE	トーンしょるけつ		8276
Mike 1416	1110 1	Michael Mi	PRITIN 8 123	7 12×4 [	I hereby certify that t	the above named ma	terials and indicated quanti	ty(les) has (hav	e) been
I hereby certify that the ab- in proper condition for tran- designated as Hazardous Wa	rsportation and I ack	and indicated quantity knowledge that delivery	(les) has (have) been ac shall be made to the fa	cepted iclity	41. ALTERNATE H		E FACILITY NAME	42. EPA II	DENTIFICATION
27. 2nd. TRANSPORTER	R COMPANY NAME	,	28. EPA IDENTIFICA NO.	ATION .	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
29. AUTHORIZED SIGN	ATURE 30	. NAME (Print)	31. Date A M / D	/ ¥	Bureau of Solid V	latural Resources Waste Management		ssistance Telep (608-266-3232 (800-424-8802	)
	•	2057	T-SO 11300	BTU/CB	Box 8094 Madison, Wiscon	sin 53708	FOR DNR USE ONLY	· · · · · ·	

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144 FORM 4400-66

**REV. 6-81** 

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MAHINES I MUNBER

Please type or print clearly using ball point pen - press hard. GENERATOR (SHIPPER) SECTION 1. COMPANY NAME 2. EPA IDENTIFICATION NO. 3. COMMENTS/SPECIAL INSTRUCTIONS Milwaukee Solvents & Chemicals WID023350192 4. P.O. BOX OR STREET ADDRESS P.O.Box 444 5. CITY, STATE, ZIP CODE 6. TELEPHONE NUMBER (414)252-3550 Butler, WI 53007 11. US DOT 12. PHYSICAL STATE 13. US EPA 14. SHIPPING 7. NUMBER & TYPE OF 10. US DOT 8. GALLONS 9. WASTE NAME WASTE CODE WEIGHT (Pounds) HAZARD CLASS NUMBER (Enter number in boxs-CONTAINER Flammable 1. Solid 3, Mixture 3 Waste Flammable Liquid NOS 2. Liquid F003 Tanker Liquid UN1993 1. Solid 3. Mixture 2. Liquid 1. Solld 3. Mixture 2. Liquid 16. NAME (Print) 17. DATE SHIPPED M D Y This is to certify that the above named materials are properly classified, described, packaged, marked, 15. AUTHORIZED SIGNATURE and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained fierein is true, accurate and complete. HAZARDOUS.WASTE FACILITY SECTION TRANSPORTER SECTION 32. FACILITY NAME 18. COMPANY NAME 19. EPA IDENTIFICATION 33. EPA IDENTIFICATION TLD069506160 American Chemical Service · 34. P.O. BOX OR STREET ADDRESS Mr. Frank. Inc. TND016360265 20. P.O. BOX OR STREET ADDRESS 201 West 155th Street 21. CITY, STATE, ZIP CODE 420 South Colfax 22. TELEPHONE NUMBER 36. TELEPHONE NUMBER 312 596-3377 South Holland, IL 60473 Criffith, Indiana 46319 23. COMMENTS I hereby certify that the above named materials and indicated quantity (les) has (have) been I hereby certify that the above named materials and indicated quantity(les) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. received and accepted 38. AUTHORIZED SIGNATURE 39. NAME (Print) 40. Date Accepted 24. AUTHORIZED SIGNATURE 25. NAME (Print) 26. Date Accepted nereby certify that the above named materials and indicated quantity (he) has (have) been accepted 42. EPA IDENTIFICATION in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility. 27. 2nd, TRANSPORTER COMPANY NAME 28. EPA IDENTIFICATION 43. AUTHORIZED SIGNATURE 44. NAME (Print) 45. Date Accepted M / D / Y 29. AUTHORIZED SIGNATURE 30. NAME (Print) 31. Date Accepted 46. MAIL TO: 47. Emergency 24 Hour Assistance Telephone Number M , D , Y

Madison, Wisconsin 53708

In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

See reverse side, Copy 6, for instructions.

HAZARDOUS WASTE MANIFEST FORM Wisconsin Statutes 144 FORM 4400-66 REV. 6-81 REV. 6-81

MANIFEST NUMBER

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Please type or print clear!	y using ball poin	nt pen - press hard.		FORM 4	400-66	¥, KE∆'0-91			
GENERATOR (SHIPPE	<u> </u>	<u> </u>	<del></del>	<del></del>			<del></del>		<del></del>
1. COMPANY NAME	.,, 0_0	<del></del>	12. EPA IDENTIF	ICATION NO.	3. COMMENTS/SPE	CIAL INSTRUCTIO	NS .		
Milwaukee So	lmamba c	Chamianla	WID02335			•			
4. P.O. BOX OR STREE		CHEMICALS	MIDO2333	0132					
	TADDRESS	<u>.</u> 4					•		
P.O.Box 444				· · · · ·			•		10 m
5. CITY, STATE, ZIP CO	DE	استختامه	6. TELEPHONE	NUMBER					· · · · · · · · · · · · · · · · · · ·
Butler, WI 5	3007		(414)25	2-3550			<del>,</del>		**
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9	. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds
- Tanker	4 200	Waste Flamm	mable Liqu	id NOS	Flammable Liquid	UN1993	1. Solld 3. Mixture 3 2. Liquid	F003	35 700
	7, -	_		~fi			1. Solid 3. Mixture 2. Liquid		
			<b>)</b> ,	- 4		·	1. Solid 3. Mixture 2. Liquid	<u> </u>	
This is to certify that the ab and labeled and are in prope of the U.S. Department of	er condition for tr	ansportation according t	o the applicable reg	ulations	IS. AUTHORIZED SI	IGNATURE	16. NAME (Print)	.*	17. DATE SHIPPED M D Y
talso certify that the inform	nation contained	nerein is true, accurate a	nd complete.	rai Resources.	) <u>j</u>	1. 16 . K	1 1. 191 . 1	916 K	11111
A. Salar	<u> </u>			· **				· 1	<u> </u>
TRANSPORTER SECT	ION		37		HAZARDOUS WA	ASTE FACILITY	SECTION	4 4	1
18. COMPANY NAME			19.EPA IDENTIF	IQATION - 1	82. FACILITY NAM	ME	, , , , , , , , , , , , , , , , , , , ,	33. EPA II	DENTIFICATION
Mr. Frank. I	na Hè		ILD06950	6360	Imerican	Chemical S	ervice .	NO.	16360265
20. P.O. BOX OR STREE	T ADDRESS	<del></del>	LTINGASSA	ATAX 1	34. P.O. BOX OR S	TREET ADDRESS	CZ V Z CC		710300203
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201 West: 155	tn Street	<u> </u>	22. TELEPHONE	NUMBER	420 South	ZIR COOF		136 TELE	PHONE NUMBER
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South Hollan 23. COMMENTS	g II eda	73	(312)59	6-3377	Griffith,	Indiana 4	6319	219	BXXXXX
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in proper condition for tran- designated as Hazardous Wa	sportation and I a	cknowledge that delivery	shall be made to the	he facility	received and accepte 38. AUTHORIZED	SIGNATURE A	39. NAME (Print)	_)+	40. Date Accepted
24. AUTHORIZED.SIGNA		5. NAME (Print)		ate Accepted	11.	1 10 11	り、一世には	てだり	THE PLANT
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I hereby certify that the abo in proper condition for tran designated as Hazardous Wa			y (ies) has (have) bee y shali be made to th	en accepted he facility			EFACILITY NAME	NO.	DENTIFICATION
27. 2nd. TRANSPORTER	COMPANY NAV	E ***	28. EPA IDENTIF	FICATION	43. AUTHORIZED	SIGNATURE	44. NAME (Print)		45. Date Accepted
						'	in the second		M / D / Y
29. AUTHORIZED SIGN	ATURE 3	O. NAME (Print)		ate Accepted / D / Y		Natural Resources		(608-266-3232	}
٧		· Sen.	···		Bureau of Solid Box 8094	Waste Management		(800-424-8802	)
•		,	124 KT	-50	Madison, Wiscon	nsin 53708	FOR DNR USE ONLY		

#### HAZARDOUS WASTE MANIFEST ORIGINAL - NOT NEGOTIABLE -02-MANIFEST DOCUMENT NUMBER 4503 POSHIPPER NUMBER MR FRANK 0079/018 NAME OF CARRIER (SCAC) CARRIER NUMBER IDENTIFICATION \* 12 DIGIT EPA ID # COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER DATE SHIPPED Mgls Coatings & Chemical; 3134 Californica GENERATOR ST' NE 006252233 Mols Mn 55418 612-781-4833 18Dec80 TRANSPORTER Mr. Frank, 201 West 155th, South Holland, Ill 60473 LD069506160 18Dec80 TRANSPORTER # 2 (beriuper 11) n/a Chemical Svc, Inc 420 South Colfax ISDF TREATMENT TORAGE OR DIS Griffith, Ind.46319 219-924-4370 ND016360265 POSAL FACILITY ... TSOF TREATMENT STORAGE OR DIS POSAL FACILITY **经国际** WASTE INFORMATION DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203 UN I NO. OF UNITS & EXEMPTION OR NO LABELS REQUIRED CHARGES HM RATE TYPE NA # Use Only 1800 Hazardous Waste, nos (Solvent Guls waste frm paint Mfq.) K078 Flammable SPECIAL HANDLING INSTRUCTIONS COMMENTS For verification of Mpls Coating & Chemical EPA ID# PLACARDS TENDERED Contact PPA Region V. Bob Stone 312-886-6149 On "Collect on Delivery" Shipments, the letters "COD" must appear before consigned a name or as otherwise provided in Item 430, Sec. 1 Yes 🗆 No 🗆 REMIT C.O.D. FEE: ... PREPAID [] COLLECT 572 C.O.D. TO: COD Anti s TOTAL "If the shipment moves between two ports by CHARGES: a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight." carrier shall not make delivery of this shi I and all other lawful charges FREIGHT CHARGES FREIGHT PREPAID RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the properly described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns. CERTIFICATION This is to certify acceptance of the hazardous waste shipment. This is to certify that the above-named materials are properly Butte 7.0 classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required) This is to certify acceptance of the hazardous waste for treatment, segulations of the Department of Transportation and the U.S. Environmental Protection Agency storage or disposal The same **1**8Dec30 8Dec80 GENERATOR'S SIGNATURE

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

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		12 DIGIT EPA ID #		СОМ	PANY NAM	E, MAILING ADDRES	SS, AND TELEPHON	E NUMBER				ATE SHIPPED
GENERATOR/ SHIPPER	MND	006252233		ols. Coatings & Chemical, 3134 California St. NE ols. MN 55418 612-781-4833						Apr81		
TRANSPORTER # 1	IID	069506160	Mr.Fran	k,201 West	: 155t	h,South Ho	312 Olland, ILL	-596-33 60473	77		Pr81	
TRANSPORTER # 2 (If required)	N,	/A	٠.						٠.			
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND	016300265	America 46319	n Chemical 219-924-		Inc. 420 S	South Colf	ax,Grif	fith	, IND	4-	15-8
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY												
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		4 6										
SPECIAL HAND	LING I	NSTRUCTIONS	·	·								
COMMENTS				·						BIACA	DOS T	ENDERE
On "Collect on Deli	ivery" sl	nipments, the lett	ers "COD" must a	ppear before con	isignee's	name or as other	wise provided in	Item 430, Se	c. 1	Yes		No 🗆
REMIT C.O.D. TO: ADDRESS			•		·	COD	Amt: \$ M	/ <u>a</u>		C.O.D. FEE: PREPAID C COLLECT C	] _	
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specifically stated by the st	per	not exceeding.	Carrier's Or Ship		Signature		(Signature of Consigno			FREIGHT PREPAI except when box a right is checked		Check box if charg
Bill of Lading, and condition indicated abov as meaning an	the proper of contive which s by person	o the classifications as with described above in ents of packages un- aid carrier (the word of or corporation in poss- be of delivery at said of oute to said destination	apparent good order known), marked, co carrier being understo ession of the property estination, if on its fo	, except as noted (co nsigned, and destin od throughout this co r under the contract) : oute, otherwise to del	ntents ned as ontract agrees liver to	any time intereste shall be subject to the date of shipm Shipper hereby the governing clas	rty over all or any por id in all or any said i all the bill of lading	tion of said rou property, that er terms and cond miliar with all that aid terms and	very servi Itions in I	tination and as to the to be perfor the governing of lading terms an	med hereu. lassification id condition	ty at nder n on .
				(	CERTIF	ICATION						
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GENERATOR'	S SIGNA	ATURE .		DATE		TSDF SIGNATUR	<b>1</b> Ε			DA	ATE	

## HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-07-

MANIFEST DOCUMENT NUMBER

PO 4640

SHIPPER NUMBER

CARRIER NUMBER

79029

(SCAC)

Mr. Frank

NAME OF CARRIER

		IDENTIFICATION	
	12 DIGIT EPA ID # '	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED
GENERATOR/ SHIPPER	MND 006252233	Mpls. Coatings & Chemical, 3134 California St. NE Mpls, MN. 612-781-4833	8 June 81
TRANSPORTER # 1	TID 069506160	312-596-3377 Mr. Frank, 201 West 155th, South Holland, III 60473	8 June 81
TRANSPORTER # 2 (if required)	N/A		
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY	IND 016300265	American Chemical Svc. Inc. 420 South Colfax, Griffith, IND 46319 219-924-4370	6/4/31
TSDF TREATMENT STORAGE OR DIS— POSAL FACILITY		A 10 萬 3 間 A 1	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	нм	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1/TW	Yes	Waste Paint, Flammable Liquid	UN 1263	No .	Gals ''	4,500		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS		
	de .	

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

PLACARDS,	TENDERED
Yes 🗇	No 🗆

C.O.D. FEE

C.O.D. TO: ADDRESS

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

COD

Signature

Amt: \$

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consigner without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

PREPAID | COLLECT |

TOTAL CHARGES:

FREIGHT CHARGES

FREIGHT PREPAID
except when but at
right is checked

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said properly over all or any portion of said route to destination and as to each party at any time interested in all or any said properly, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in

the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

#### CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATORIS GROWN TURE

8 June 81

DATE

This is to certify acceptance of the hazardous waste shipment.

(Tespino TRANSPORTER #1 SIGNATURE & DATE

TSDF SIGNATURE

TRANSPORTER #2 SIGNATURE & DATE (If required) This is to certify acceptance of the harardous waste for treatment

storage or disposal.

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

	XX	***	******	<b>***</b> *		<b>**</b>	XX		X	XXX
HAZ	ARD	OUS WAS	STE MANIFEST							
	ORI	GINAL - NOT	NEGOTIABLE		-,		-10-			
-						M	IANIFĒST	DOCUMEN	IT NUM	BER
						4	PO 46			
			Mr. Frank	-		/ /		PPER NUM		
•		<del></del>	NAME OF CARRIER		(SCAC			RIER NUM		<del></del>
			IDENTIFI	CATION						
		12 DIGIT EPA ID#	COMPÁÑY NAM	E MAILING ADDRES	S, AND TELEPHO	NE NUMBER				DATE SHIPPED
GENERATOR/ SHIPPER	MID	006252233	Mpls. Coatings & Chem Mpls, MN, 612-781-483		Californ	la St. N	E			OR RECEIVED
-TRANSPORTER # 1	TIL.	069506160	Mr. Frank, 201 West 155	ith,South H	olland,	312-596 IIL 6047			-	July31
TRANSPORTER # 2 (If required)		N/A				_				/
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		016300265	American Chemical Svc.	Inc. 420	South Col	lfax, Gr	iffiti	ı, PD	7	17/61
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY						:				· · · · · · · · · · · · · · · · · · ·
		<u> </u>	WASTE INF	ORMATION						
NO. OF UNITS & CONTAINER TYPE	нм	(Pr	CRIPTION AND CLASSIFICATION oper Shipping Name, Class and on Number per 172, 101, 172, 202, 172, 203	UN # Or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TO	OTAL ANTITY	RATE	CHARGES (For Carrier Use Only)
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COMMENTS						-				ENDERED
On "Collect on De	livery" s	hipments, the letter	s "COD" must appear before consignee's	name or as otherw	vise provided in	Item 430, Se	c. 1	Yeş. (		No 🗆
REMIT C.O.D. TO: ADDRESS				COD	Amt: \$	N/A	Įρ	O.D. FEE: REPAID	s	
Nota—Where the rate is are required to state spe- declared value of the pro-	cifically in wi	Iting the agreed or	"If the shipment moves between two ports by a carrier by water, the law requires that the bilt of lading shall state whether it is	Subject to Section 7 of the consigned without reco- following statement. The carrier shall not m	ourse on the consignor take delivery of this si	, the consignor shall	ii sign ihe 🛭 C	OTAL HARGES:	\$	0050
The agreed or declared apecifically stated by the	shipper to be	not exceeding.	"carrier's or shipper's weight."	freight and all other lawfu	of charges		F	FREIGH PEIGHT PREPAIC Is non ton at	,	Check box if charges are to be
3	_ P#	o the classifications and	tariffs in effect on the date of the issue of this	any of, said propert	(Signature of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of Consignation of		- "	gni is checked		cortect
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				ICATION	~		<del></del>			

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

TO EAST

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)
This is to certify acceptance of the hazardous waste for treatment,
storage or disposal.

DATE

DATE

GENERATOR'S SIGNATURE
Ken Priend

### AZARDOUS WASTE MANIFEST

Mr. Frank

ODIGINA	L NOT	NEGO	

-13-MANIFEST DOCUMENT NUMBER PO 4732 SHIPPERNUMBER 2079

NAME OF CARRIER (SCAC) CARRIER NUMBER IDENTIFICATION COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER 12 DIGIT EPA ID # DATE SHIPPE OR RECEIVE Mpls Coating & Chemicass, 3134 California St. N.E. GENERATOR MND 006252233 Minneapolis, MN 55418 (612) 781 4833 10/26/81 (312) 596 3377 TRANSPORTER # 1 IID 069506160 Mr. Frank, 201 West 155th, South Holland, XM IL 60473 10/26/81 TRANSPORTER # 2 (beriuper 1i) N/A TSOF TREATMENT American Chemical Svc., Inc. 420 South Colfax, Griffith, IN STORAGE OR DIS POSAL FACILITY 46319 (219) 924 4370 IND 016360265 TSDF TREATMENT STORAGE OR DIS-

<u> </u>		WASIEINFO	PRMATION					
NO. OF UNITS & CONTAINER TYPE	нм	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carri Use Onl)
				·			1	
1/TW	Yes	Waste Paint, Flammable Liquid	UN 1263	No	Gals	2000		
						:		

### SPECIAL HANDLING INSTRUCTIONS

COMMENTS					DIACADDO	75105051
. On "Collect on Delivery" shipments, the let	tters "COD" must appear before consignee's	name or as otherw	rise provided in Item 430	), Sec. 1	Yes X	No 🗆
REMIT C.O. D. TO: ADDRESS		COD	Amt: \$	t	C.O.D. FEE: PREPAID COLLEGT S	
Note—Where the rate is dependent on value, shippers	*If the shipment moves between two ports by	Subject to Section 7 of 18 Maconsignee without reco	he conditions, if this shipment is to burse on the consignor, the consigno		TOTAL CHARGES \$	

equired to state specifically in writing the agreed or and value of the property. a carrier by water, the law requires that the bill of lading shall state whether it is carrier or shipper's weight."

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this RECEIVED, subject to the classifications and ratins in effect in the date in the fished Received Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person of corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to to its usual place of delivery at said destination, if on its route, otherwise to deliver to carrier on the route to said destination, it is mutually agreed as to each carrier of all or

EREIGHT PREPAID except when box at a right is checked (Signature of Consignor) any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of fading terms and conditions in the governing classification on

erning classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### CERTIFICATION

This is to certify that the above-	-named materials are properly
classified, described, packaged, r	marked and labeled, and are in
proper condition for transportation	on according to the applicable
regulations of the Department of	Transportation and the U.S. En-
vironmental Protection Agency	١

\* Teigh F. Walling GENERATOR'S SIGNATURE

10/26/81 DATE Ance of the hazardous waste shipment. 10-26-81

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required) This is to certify acceptance of the hazardous waste for treatment, storage or disposar/

DATE

FREIGHT CHARGES

Check bo

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

See .everse side for instructions Please TYPE or PRINT clearly using a ball point pen — PRESS HARD HAZARDOUS WA	OF Minnesola Control of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the Street of the St
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GENERATOR—SHIPPER NAME SITE I.D. NO.	TRANSPORTER NAME MPCA REGISTRATION NO.
PICKUP ADDRESS PARTY BEALD FOR TO	BUSINESS ADDRESS EPA I.D.
(4) 3134 Collifornia St. NP. (100) 006252233 CITY, STATE, ZIP CODE PHONE NO.	CITY, STATE, ZIP CODE 155th PHONE NO 19590160
⑤ Minneapolis, MN 55418	18 Fouth   Wolland,   12   60473   312/535-3377
BUSINESS ADDRESS  SAME AS ABOVE	DATE RECEIVED The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
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	MPCA REGISTRATION NO. MPCA REGISTRATION NO.
(B) QUANTITY HAZ KIND OF UNIT - PROPER DOT SHIPPING NAME CLASS WEIGHT	N/A EPA I.D. EPA I.D.
1 1800 X Jals, Waste Paint, 181263 Planmable 37000	
	DATE RECEIVED 24
4 Supplies Court State 1	AUTHORIZED AUTHORIZED X
	SIGNATURE X X X X X X X X X X X X X X X X X X X
Does Generator Plan authorize commingling?	PASSES AND ANY SAVIHAZARDOUS WAS TERRACIEUT VILLER CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE
WASTE CODE MPCA HAZARDOUS APPROXIMATE PRODUCTION DATES	FACILITY NAME STATE PERMIT/LICENSE NO.
No. PROPERTY From To	® American Chemical Sve. Inches
1 1 1 2 5 3 Flamable 2 Jan 1931	SITE ADDRESS
3 76	CITY, STATE, ZIP CODE PHONE NO.
4 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	@ Griffith, DD 46310 30
5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	DATE RECEIVED 3) The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. 3)a For exceptions see attachment.
(I)SPECIAL INSTRUCTIONS AND AND AND AND AND AND AND AND AND AND	AUTHORIZED SIGNATURE  33  33
	DATE WASTE DISPOSED (a)  I certify that the above named wastes have been processed and/ or disposed.
	AUTHORIZED SIGNATURE  TITLE  S  x
SPECIAL EMERGENCY PROCEDURE ATTACHED	MAIL TO: HAZARDOUS WASTE, MIS 322 WASHINGTON AVE. S. TO EQST 9C-1-1 4/29/81
SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.	In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7378, and the National Response Center, (800) 424-8802
The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best	
of my knowledge.	1. White—Hazardous Waste Facility Mail to Generator 2. Yellow—Generator (Shipper) Mail to 🛈 5. Gold—Hazardous Waste Facility Retain 6. Blue—Transporter (Carrier) Retain
DATE 12 4 /3 / AUTHORIZED SIGNATURE TITLE anager	3. Pink—Hazardous Waste Facility Mail to 17 7. Green—Generator (Shipper) Retain
SHIPPED 1/23/X 10 X	4. Orange—Hazardous Waste Facility Mail to Generator PO-00280-02.

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ERATOR—SHIPPER NAME	SITE I.D. NO.	and the second second	TRANSPORTER NAME	MPCA REGISTRATION NO.
pls Coating & Chemical Div	3		(5) MR IRVNK ( tank)	<b>⑤</b>
UP ADDRESS . See A 1983 Property of the September 1983	EPA I.D. SERVERS		BUSINESS ADDRESS (	EPA I.D. TLID C/CG5C/G/G/C
134 California St. NE	MND 0062522.	33	① 201 West 155th	III John Calabration of the
STATE, ZIP CODE Inneapolis, MN 55418	6 612/781-48	33	(B) South Folland, ILL 60473	PHONE NO. 19312/596-3377
NESS ADDRESS	10012/701-40	33	DATE 60 A / / The wastes	described above were received by me for shipment
SAME AS ABOVE	adalah berdan eta Paragsasa	41일 시간 기가 1	AUTHORIZED SIGNATURE	ed Hazardous Waste Facility.
			②x MPCA REGISTRATION I	NO. MPCA REGISTRATION NO.
HANTITY THAT I'M		<del></del>	SHIPMENT (3)	
UANTITY HAZ KIND OF UNIT—PROPER DOT SHIPPI	NG NAME DOT HAZ CLASS		EPA J.D.	EPA I.D.
1800 y Gals, Waste Paint, UN125	]   lammable	38000	X N/A	
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			AUTHORIZED SIGNATURE X	(A) 10 10 10 10 10 10 10 10 10 10 10 10 10
oes Generator Plan authorize commingling?   YES TYES", attach sheet listing other generators and quantitie	⊟-NO s of waste.)			
	APPROXIMATE PROD	UCTION DATES	FACILITY NAME	STATE PERMIT/LICENSE NO.
WASTE CODE PROPERTY	From	То	@ American Chemical Svc. Ir	
N 1 2 6 3 Flammable	?	1989 Jan	SITE ADDRESS	EPA I.D.
		· · · · · · · · · · · · · · · · · · ·	8 420 South Colfex	TWO 016360265
	<del></del>		CITY, STATE, ZIP CODE	1 -
	<del>- </del>		29 Griffith IVI) 46319	described above have been received for processing
<del> </del>				and valid state permit and/or other applicable laws
ECIAL INSTRUCTIONS of Classification (Applications of Classification)	ay yakesina ngangga dalah . Maspara mesakan pilapan	17.0.2	AUTHORIZED SIGNATURE	TITLE
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SPECIAL EMERGENCY PROCEDURE ATTACHED			TO WEST AGIT MAIL TO: HAZAR 322 W. 7-50 1/15/81 HOPKI	ASHINGTON AVE. S. NS, MN 55343
PPER'S CERTIFICATION: This is to certify that the above named mater ked and labelled and are in proper condition for transportation according ansportation and EPA.	to the applicable regulations o	! the Department	In case of a spill in Minnes the MPCA 24-hour emerger and the National Response	ncy number, (612) 296-7373,
wastes described above were consigned to the Carrier named. The Haza ment of hazardous waste, and has a valid permit to do so. I certify that they knowledge.	rdous Waste Facility can and w e foregoing is true and correct	rill accept this to the best	1. White—Hazardous Waste Facility Mail to Gene	
			2. Yellow—Generator (Shipper) Mail to ③ 3. Pink—Hazardous Waste Facility Mail to ⑤	<ol> <li>Blue—Transporter (Carrier) Retain</li> <li>Green—Generator (Shipper) Retain</li> </ol>

See reverse side for instructions

( To	See reverse side to instructions Please TYPE-or PRINT clearly using a ball point pen HAZARDO	State of Minnesota OUS WASTE SHIPPING PAPER  ①SHIPMENT NO
	UATHERATOR	TRANSPORTER (CARRIER)
	GENERATOR - SHIPPER NAME , John Manager Site LD. NO. 12 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -	TRANSPORTER NAME MPCA REGISTRATION NO.
1	@ Mpls Coatings & Chemicals	(B) Mr. Frank (B) 00 77 02 /
	PICKUP ADDRESS EPA I.D.	BUSINESS ADDRESS EPA 1.D.
`	(4) 3134 California St. N.E. MND 006252233	① 201 First 155th IID 060506160
. ]	CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE PHONE NO.
- 1	⑤ Minneapolis, MN 55418 ⑥ (612) 781 4833	(8) South Holland, IL 60473 (9) (312) 596 3377
	BUSINESS ADDRESS  Same as above	DATE RECEIVED 10 /20 /81 The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
	The foliage of the section is a section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the sect	AUTHORIZED SIGNATURE  (2) X Color Authorized 22 DRIVER
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" [	Jimid Jimid	DATE RECEIVED 29
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4	WASTE CODE MPCA HAZARDOUS APPROXIMATE PRODUCTION DATE	ATES FACILITY NAME STATE PERMIT/LICENSE NO.
N	lo. PROPERTY From	1  American Chemical Svc. Inc. 2
Ŀ	1Ψ N 12 5 3 Flammable . Scott 1981	SITE ADDRESS EPA I.D.
1	3 San San San San San San San San San San	CITY, STATE, ZIP CODE . PHONE NO.
., <u>L</u>	4	@ Griffith, IN 46319 @ (219) 924 4379
ļ	5	DATE RECEIVED 31 To the wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. (3)a For exceptions see attachment.
	①SPECIAL INSTRUCTIONS	AUTHORIZED SIGNATURE  3 3
1		DATE WASTE DISPOSED (14)  I certify that the above named wastes have been processed and/or disposed.
	જ્યારે મુશ્કે માર્ગિકાર પુરાવે કરવા કરવા જાણાં માટે છે. આ મારા મારા મારા મારા મારા મુખ્યાના મારા મારા મુખ્યાના ત્રીમાં ઉપલબ્ધ મારા મારા મારા મારા મારા મારા મારા માર	AUTHORIZED SIGNATURE AS TRANSPORTATION OF THE TITLE
•		(3) x
	SPECIAL EMERGENCY PROCEDURE ATTACHED	7-50 10/27/81 TO: HAZARDOUS WASTE, MIS 322 WASHINGTON AVE. S. HOPKINS, MN 55343
$\int$	SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.	in case of a spill in Minnesota, immediately call
	The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best	_
		2. Yellow—Generator (Shipper) Mail to 🟵 6. Blue—Transporter (Carrier) Retain
D	AUTHORIZED SIGNATURE  TITLE  MANAGER  MANAGER	3. Pink—Hazardous Waste Facility Mail to ① 7. Green—Generator (Shipper) Retain 4. Orange—Hazardous Waste Facility Mail to Generator PO-00280-027
<u>ට</u>	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	HC 5406 (4-80)

ase print or type. (Form designed for use on elite (12-pitch) typewriter	r.)		Form Approve	OMB No. 205	0-0039. Expires 9-30-88				
UNIFORM HAZARDOUS  1. Generator's US EPA SMALL QINIY	2. Page 1 of	1 t annuisand bu Cartaral laur							
3. Generator's Name and Mailing Address Miracle Auto Painting & Body Repair 1815 East Apache Blvd., Tempe, AZ	A State Manifest Document Number  B. State Generator's ID								
4. Generator's Phone ( 602 ) 829-8320	4. Generator's Phone ( 602 ) 829–8320  5. Transporter 1 Company Name  6. US EPA ID Number								
5. Transporter 1 Company Name Adco Express									
7. Transporter 2 Company Name	8. US EPA ID Numbe	er	E.≥State Tra	risporter's ID	312-429-1660 				
RAY TECH EXPRESS	ILD 980904304				312-429-9888				
9 Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue	10. US EPA ID Numbe	er		ilinys (D. S.)					
Griffith, IN 46319	IND 016 360 26	55	H Fecility's Phone 18						
11. US DOT Description (Including Proper Shipping Name, H	lazard Class and ID Number)	12. Conta No.	T	I3. 14 otal Un antity Wt∧	it Waste No.				
WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID NA 1263	(F003)	2	da /	06 0	(100)				
b.									
C.									
d									
15. Special Handling Instructions and Additional Information	on								
16. GENERATOR'S CERTIFICATION: I hereby declare that the cont proper shipping name and are classified, packed, marked, and I according to applicable international and national government if I am a large quantity generator, I certify that I have a progra economically practicable and that I have selected the practicat future threat to human health and the environment; OR, if I am	abeled, and are in all respects in pro egulations. Im in place to reduce the volume an ble method of treatment, storage, or	per condition d toxicity of	for transport by waste generated rently available	highway d to the degree to me which mi	nimizes the present and				
the best waste management method that is available to me and Printed/Typed Name					Month Day Year				
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18. Transporter 2 Acknowledgement of Receipt of Materia Printed/Typed Name	Signature		<u> </u>	<u>,                                     </u>	Month Day Year				
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19. Discrepancy Indication Space			į	<i>,</i>	,				
20. Facility Owner or Operator: Certification of receipt of h		this manuf	est except as	noted in Item	<del></del>				
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۱ ا	UNIFORM HAZARDOUS  **BOTTOM No. 1. Generator's US EP.  WASTE MANIFEST SMALL QNTY. 6	A ID No.'	Manifest Doc	ument No	2. Pa			the shad by Fede				
3.	Generator's Name and Mailing Address Miracle Mile Collision 5020 Winona, Toledo, OH 43613	•	A. State Manifest Document Number     B. State Generator's ID.									
4.	Generator's Phone ( 419 ) 473-1157				D. Glate Ognerator S ID							
5.	. Transporter 1 Company Name	-	S EPA ID Numbe	τ		ate Transporter						
_	ADCO Express		17 267 364 S EPA ID Numbe		D. Transporter's Phone 312-429-1660  E. State Transporter's ID 1: \$4.5.  F. Transporter's Phone 2: 2.  G. State Facility's ID 70.  H. Facility's Phone 2: 2.19-924-4370							
'	. Transporter 2 Company Name	i. j	3 EFA ID Numbe									
9.	Designated Facility Name and Site Address  American Chemical Service	. 10. U	S EPA ID Numbe	r								
	420 South Colfax Avenue Griffith, IN 46319	IND (	 016 360 265	5								
1	11. US DOT Description (Including Proper Shipping Name, F	Hazard Class ar	nd ID Number)	12. Conta	iners	13. Total	14. Unit	2000				
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EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT P.O. Box 7035 Indianapolis, IN 46207-7035

	7. Transporter 2 Company Name
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-	16. GENERATOR'S CERTIFICATION: hereby declare that the contents of this consignment are fully and accurately described above by
	seconding to applicable international and national government regulations. It is am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have
	determined to be economically practicable and that I have selected the practicable method of treatment; storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.
•	Printed/Typed Name Signature Signature  Month Date Year Year
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2000	18. Transporter 2 Acknowledgement of Receipt of Materials
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SINDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (DIPIGNATE MINITY SEEM IN TIGH TO! 1800 FOR SHEEM IN TIGH TO! 1800 FOR SHEEM IN TIGH TO! 1800 FOR SHEEM IN TIGH TO! P.O. Box 7035

P.O. Box 7035 Indianapolis, IN 46207-7035

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	3. Generator's Name and Mailing Address  [1] IZE TOWNS & CONSIDER AV	A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number (%)— A State Manifest Document Number
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	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											has too	
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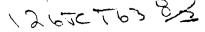
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19. Discrepancy Indication Space

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20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Month Day